Case 17-38057 Doc 1-1 Filed 12/27/17 Entered 12/27/17 11:40:57 attach correct PDF Page 1 of 6 Fill in this information to identify your case: United States Bankruptcy Court for the: Northern District of Illinois Chapter you are filing under ☑ Chapter 7 ☐ Chapter 11 Chapter 12 ☐ Chapter 13 Check if this is an amended filing Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy 12/15 The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: **Identify Yourself** About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 1. Your full name Write the name that is on your Stacie N/A government-issued picture First name identification (for example, First name your driver's license or passport). Middle name Middle name McCray Pace Bring your picture identification to your meeting Last name Last name with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) 2. All other names you N/A have used in the last 8 First name First name years Include your married or Middle name Middle name maiden names. Last name Last name N/A First name First name Middle name Middle name

(ITIN)

3. Only the last 4 digits of

your Social Security number or federal Individual Taxpayer

Identification number

Last name

9 xx - xx -

- xx - <u>6</u> <u>3</u> <u>8</u> 7

Last name

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Debtor 1 Stacle L McC First Name Middle	Cray Pace Name Last Name	Case number (# known)
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in	☑ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
the last 8 years	Business name	Business name
doing business as names	Business name	Business name
	EIN	EIN
	EIN	EIN
s. Where you live		if Debtor 2 lives at a different address:
	2321 Artesian Way	
	Number Street	Number Street
	Montgomery IL 60538 City State ZIP Code	City State ZIP Code
	Kendall	<u> </u>
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Same	·
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Code
Why you are choosing	жения в территиры при	Check one:
this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)
		· · · · · · · · · · · · · · · · · · ·

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Stacie L McCray Pace Debtor 1 Case number (# known)_ Part 2 **Tell the Court About Your Bankruptcy Case** The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Bankruptcy Code you are choosing to file Chapter 7 under Chapter 11 ☐ Chapter 12 ☐ Chapter 13 8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). ☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ☑ No bankruptcy within the ☐ Yes. District _ last 8 years? When Case number MM / DD / YYYY District ___ When Case number _ MM / DD / YYYY District MM / DD / YYYY 10. Are any bankruptcy M No cases pending or being ☐ Yes. Debtor filed by a spouse who is Relationship to you not filing this case with When Case number, if known you, or by a business MM / DD / YYYY partner, or by an affiliate? Debtor Relationship to you When Case number, if known_ MM / DD / YYYY 11. Do you rent your ☐ No. Go to line 12. residence?

Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

No. Go to line 12.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

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Stacie L McCray Pace Debtor 1 Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. Go to Part 4. of any full- or part-time Yes. Name and location of business business? A sole proprietorship is a business you operate as an Name of business, if any individual, and is not a separate legal entity such as a corporation, partnership, or Number Street LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. City State ZIP Code Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) ■ None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your Chapter 11 of the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if **Bankruptcy Code and** any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. For a definition of small business debtor, see No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in 11 U.S.C. § 101(51D). the Bankruptcy Code. Tyes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention Part 4: 14. Do you own or have any No property that poses or is Yes. What is the hazard? alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs ff immediate attention is needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? Where is the property? Number City State ZIP Code

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Debtor 1

Stacie L McCray Pace

Case number	(if known)
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Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1	A	\bot	ıt l	Deb	tor	1	
----------------	---	------	------	-----	-----	---	--

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about
credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by abone or

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about
credit counseling because of:

I Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Stacie L McCray Pace

Debtor 1

Case number (if known) Part 6: Answer These Questions for Reporting Purposes 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts do as "incurred by an individual primarily for a personal, family, or household purpose." vou have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that after Ves. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and any exempt property is administrative expenses are paid that funds will be available to distribute to unsecured creditors? excluded and O No administrative expenses ☐ Yes are paid that funds will be available for distribution to unsecured creditors? 18. How many creditors do 1-49 1,000-5,000 25,001-50,000 you estimate that you 50-99 5,001-10,000 50.001-100,000 owe? 100-199 10,001-25,000 ☐ More than 100,000 200-999 19. How much do you \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion estimate your assets to \$50,001-\$100,000 \$10,000,001-\$50 million □ \$1,000,000,001-\$10 billion be worth? \$100,001-\$500,000 \$50,000,001-\$100 million □ \$10,000,000,001-\$50 billion □ \$500,001-\$1 million ☐ \$100,000,001-\$500 million More than \$50 billion 20. How much do you \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion estimate your liabilities \$50,001-\$100,000 \$10,000,001-\$50 million □ \$1,000,000,001-\$10 billion to be? \$100,001-\$500,000 □ \$50,000,001-\$100 million □ \$10,000,000,001-\$50 billion \$500,001-\$1 million □ \$100,000,001-\$500 million More than \$50 billion Part 79 Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bank turticy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§/152, 1341, 1516, and 3571. x X _{N/A} Signature of Signature of Debtor 2 Executed on/ Executed on MM / DD / YYYY

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Debtor 1

Stacie L McCray Pace

irst Name Middle Name Last Name

Case number (# known)____

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

otate exemption take that apply.	
Are you aware that filing for bankruptcy is a serious acconsequences? No Yes	ction with long-term financial and legal
Are you aware that bankruptcy fraud is a serious crime inaccurate or incomplete, you could be fined or imprison. No Yes	e and that if your bankruptcy forms are oned?
Did you pay or agree to pay someone who is not an at ☑ No ☐ Yes. Name of Person	
By signing here, I acknowledge that I understand the ri have read and understood this notice, and I am aware attorney hav cause me to lose my rights or property if	that filing a bankruptcy case without an I do not properly handle the case. N/A
Signature of Debtor 1	Signature of Debtor 2
Date <u>A J AJ</u> MM / DD / YYYY Contact phone (630) 777-5537	Date MM / DD / YYYY
Contact phone (OCO) 111-0001	Contact phone
Cell phone (630) 777-5537	Cell phone
Email address smccray_006@yahoo.com	Email address

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Fill in thi	s information to identify your case:	

Debtor 1	Stacie L McCray Pace First Name Middle Name Last Name	
Debtor 2 (Spouse, if fi	N/A ling) First Name Middle Name fast Name	
	tes Bankruptcy Court for the: Northern District of Illinois	
Case numb		
Case humin	(If known)	Check if this is an amended filing
		anonasa naig
Official	LEarne 1000	
	Form 106Sum	
	ary of Your Assets and Liabilities and Certain Statistica	
Be as complinformation	plete and accurate as possible. If two married people are filing together, both are equally respondent the information on this formation and the formation are the formation are the formation are the formation and the formation are the formation are the formation and the formation are the formation are the formation and the formation are the formation are the formation are the formation and the formation are the formation a	nsible for supplying correct
your origin	n. Fill out all of your schedules first; then complete the information on this form. If you are filing all forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	amended schedules after you file
Part 1:	Summarize Your Assets	
	Summarize Tour Assets	
		Your assets
6 C-6	A/D D	Value of what you own
	e A/B: Property (Official Form 106A/B) / Iine 55, Total real estate, from <i>Schedule A/B</i>	\$ 0.00
	and on the other, from otherwise AVB	a 0.00
16. Сору	line 62, Total personal property, from Schedule A/B	s 16,279.00
		- MARIA ARTINI, I by I as you make the state of the state
тс. Сару	line 63, Total of all property on Schedule A/B	s16,279.00
Part 2:	Summarize Your Liabilities	
		Your liabilities
2. Schedule	D: Creditors Who Have Claims Secured by Property (Official Form 106D)	Amount you owe
2а. Сору	the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule	24,170.00
 За. Сору 	E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$ 65,816.00
		441999445344447
ы. Сору	the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ _{\$} 25,515.00

Part 3: Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I 3,237.16 5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J 3,498.00

115,501.00

Your total liabilities

			att	Filed 12/27/17 ach correct PDF	Entered 12/27/17 11:40:57 Page 9 of 63	Desc	to
De	btor 1	Stacie L McCray Pa	C Q Last Name		Case number (# known)	-	
P	art 4:	Answer These Questi	ions for Admin	istrative and Statisti	cal Records		
6.	Are yo	u filing for bankruptcy un	der Chapters 7,	11, or 13?			
	☐ No. ☑ Yes	. You have nothing to report	t on this part of th	e form. Check this box an	d submit this form to the court with your other	∍r schedules.	
7.	What k	ind of debt do you have?	There is no angul indicate and property on a firm of some of the first of the first of the first of the first one of the firs	est Committee (the England Street Edition) is the expension control to the control and the control and the Committee and	માં કેલોકિક્સ જ ભાગનું કહિતો, સ્વત્યના માટે કહિતાના જુંદરી સિક્ષાને કર્યાં હતા. કલ્યારીમાં મહત્વ સહિતા કરતે છે ત્યારે માત્ર કર્યા માત્ર કર્યા માત્ર કર્યા માત્ર કર્યા સિક્ષાને કર્યા હતા.	and explain Explained and an income and an income	dina di melangilan dalah peranggan
	You fam	ur debts are primarily con ily, or household purpose."	sumer debts. Co 11 U.S.C. § 101(onsumer debts are those " 8). Fill out lines 8-9g for si	incurred by an individual primarily for a pers atistical purposes. 28 U.S.C. § 159.	onal,	
	You this	ur debts are not primarily form to the court with your	consumer debts other schedules.	. You have nothing to rep	ort on this part of the form. Check this box a	nd submit	
8.	From the Form 1	he Statement of Your Curi 22A-1 Line 11; OR, Form 12	rent Monthly Inc 22B Line 11; OR,	ome: Copy your total cum Form 122C-1 Line 14.	ent monthly income from Official	\$	4,819.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	65,816.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	3,017.00
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$	0.00
9g. Total. Add lines 9a through 9f.	\$	68,833.00

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	at	tach correct PDF Pa	age 10 of 63		
Fill in this i	nformation to identify your case and th	is filing:			
	Storio I McCroy Door				
Debtor 1	Stacie L McCray Pace First Name Middle Name	Last Name			
lebtor 2 Spouse, if filing	N/A First Name Middle Name				
		Last Name			
	Bankruptcy Court for the: Northern District of				
ase number		AARA AAAA, AAAA, AAAA AAAA AAAA AAAA AA			Check if this is an
			_		amended filing
Official	Form 106A/B				_

ocne	dule A/B: Propert	У			12/15
Part 1: D	name and case number (if known). Answerseribe Each Residence, Building, was or have any legal or equitable interest.	, Land, or Other Real Estate			
	to to Part 2.	3		city.	
🔲 Yes. V	Where is the property?				
		What is the property? Check	all that apply.	Do not deduct secured c	
1.1.		Single-family homeDuplex or multi-unit building	_	the amount of any secure Creditors Who Have Cla	ed claims on Schedule D:
Stre	eet address, if available, or other description	Condominium or cooperative		A CONTRACTOR OF THE SALE	and the second of the second
		Manufactured or mobile hor		Current value of the entire property?	Current value of the portion you own?
		Land Investment property		\$	\$
City	State ZIP Code	Investment property Timeshare		Describe the nature	of your ownership
City	State ZIP Code	Other		interest (such as fee the entireties, or a lif	simple, tenancy by
		Who has an interest in the p	roperty? Check one.	the charenes, of a m	e estate), ii kilowii.
		Debtor 1 only		-	
Cou	inty	Debtor 2 only		Check if this is co	
		Debtor 1 and Debtor 2 only At least one of the debtors ar	nd another	(see instructions)	minumity property
		Other information you wish	to add about this it	em, such as local	
If you own	or have more than one, list here:	property identification numb	oer:		
	,	What is the property? Check all	I that apply.	promise and apply a	grander en
1.2.		Single-family home		Do not deduct secured cla the amount of any secure	d claims on Schedule D: 🗀
Stree	et address, if available, or other description	Duplex or multi-unit building		Creditors Who Have Clair	ns Secured by Property.
		Condominium or cooperativeManufactured or mobile home		Current value of the entire property?	Current value of the
- Park Association		Land	_	\$	portion you own?
		Investment property		Ψ	Ψ
City	State ZIP Code	Timeshare		Describe the nature of interest (such as fee	of your ownership simple, tenancy by
		Other_		the entireties, or a life	e estate), if known.
		Who has an interest in the pro Debtor 1 only	pperty? Check one.		
Cour	ntv	Debtor 1 only			
	10.7				

Debtor 1 and Debtor 2 only

At least one of the debtors and another

property identification number: _

Other information you wish to add about this item, such as local

☐ Check if this is community property

(see instructions)

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Debtor 1

Stacie L McCray Pace attach correct PDF Page 11 of 63

Case number (if known)

1.	3. Street address, if availa	ble, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Do not deduct secured of the amount of any secure Creditors Who Have Clai	ed claims on Schedule D
	City	State ZIP Code	☐ Investment property ☐ Timeshare ☐ Other	Describe the nature interest (such as fee the entireties, or a life	simple, tenancy by
	County		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number:	Check if this is co (see instructions) em, such as local	mmunity property
2. Add you	the dollar value of the have attached for Part	portion you own for al 1. Write that number h	ll of your entries from Part 1, including any entrie	s for pages ······→	\$0.00
	s, vans, trucks, tractors		e, also report it on Schedule G: Executory Contracts a	and Unexpired Leases.	
	163				:
3.1.	Make: Model; Year:	Hyundai Sonata 2014	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured claim the amount of any secured Creditors Who Have Claim Current value of the	ms or exemptions. Put claims on Schedule D: s Secured by Property.
	Approximate mileage:	47874	☐ At least one of the debtors and another	entire property?	portion you own?
	Other information: in good condition		☐ Check if this is community property (see instructions)	\$11,455.00	\$ 11,455.00
lf you	u own or have more than	one, describe here:			
3.2.	Make: Model: Year: Approximate mileage:		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another		ns or exemptions. Put
	Other information:	The second secon	Check if this is community property (see instructions)	\$	\$

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Case number (if known)

Debtor 1

attach correct PDF Stacie L McCray Pace First Name Middle Name Last Name

3.3.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cl	aims or exemptions. Put
	Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clair	ed claims on Schedule D: ims Secured by Property.
	Year:	Debtor 2 only	entitle blick great and a section	
	Approximate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
		At least one of the debtors and another	entile property?	portion you own?
	Other information:	☐ Check if this is community property (see	\$	\$
	The state of the s	instructions)		
.4.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	aims or exemptions. Put
	Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
	Year:	Debtor 2 only		
	Approximate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
		At least one of the debtors and another	sittire property:	portion you own?
	Other information:		ď	•
		Check if this is community property (see instructions)	\$	3
kamp INo	oles: Boats, trailers, motors, persona o	and other recreational vehicles, other vehicles, and access watercraft, fishing vessels, snowmobiles, motorcycle accessor	ssories ories	
No Ye:	oles: Boats, trailers, motors, persona o	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	ories	I claims on Schedule D: is Secured by Property. Current value of the portion you own?
Amp No Ye:	oles: Boats, trailers, motors, personal ss Make: Model: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any secured Creditors Who Have Claim	ims or exemptions. Put I claims on Schedule D: is Secured by Property. Current value of the
No Ye	oles: Boats, trailers, motors, personal ss Make: Model: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured cla the amount of any securec Creditors Who Have Claim Current value of the entire property?	ims or exemptions. Put I claims on Schedule D: is Secured by Property. Current value of the portion you own?
No Ye	oles: Boats, trailers, motors, personal bis Make: Model: Year: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured cla the amount of any securec Creditors Who Have Claim Current value of the entire property?	ims or exemptions. Put I claims on Schedule D: is Secured by Property. Current value of the portion you own?
Nool Ye	oles: Boats, trailers, motors, personal ss Make: Model: Year: Other information: own or have more than one, list here: Make:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one.	Do not deduct secured cla the amount of any securec Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured claim	ims or exemptions. Put I claims on Schedule D: is Secured by Property. Current value of the portion you own? \$
Nool Ye	oles: Boats, trailers, motors, personal by Make: Model: Year: Other information: own or have more than one, list here: Make: Model:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured cla the amount of any securec Creditors Who Have Claim Current value of the entire property?	ims or exemptions. Put I claims on Schedule D: is Secured by Property. Current value of the portion you own? \$
Nool Ye	oles: Boats, trailers, motors, personal ss Make: Model: Year: Other information: own or have more than one, list here: Make:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured claithe amount of any secured Creditors Who Have Claim Current value of the	ims or exemptions. Put I claims on Schedule D: is Secured by Property. Current value of the portion you own? \$
Nool Yes	oles: Boats, trailers, motors, personal by Make: Model: Year: Other information: own or have more than one, list here: Make: Model:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured cla the amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured clai the amount of any secured Creditors Who Have Claim	ims or exemptions. Put I claims on Schedule D: is Secured by Property. Current value of the portion you own? \$

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Debtor 1

Stacie L McCray Pace
First Name Middle Name

Lasi Name

Case number (if known)_

Part 3:

Describe Your Personal and Household Items

D	o you own or have any	legal or equitable interest in any of the following items?	Current	value of the
`. `.			Do not dec	ou own? luct secured claims
6.	Household goods and	l furnishings	or exempti	ons.
		nces, furniture, linens, china, kitchenware		
	☐ No			
	Yes. Describe	bed, king bedroom/mattress, dresser/mirror, twinXL boxspring(AcceptanceNow) washer/dryer, stove/refrig, food, table/chairs, clock all items at used value	\$	1,635.00
7.	Electronics			
	Examples: Televisions a collections; e	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music electronic devices including cell phones, cameras, media players, games		
		tv, cell phone, home computer, dvd player, items at pawn shop value used	\$	295.00
8.	Collectibles of value			
	stamp, coin,	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles		
	Yes. Describe	bible, school books, family pictures(no cash value) cd's/dvd's at used book store prices	\$	165.00
9.	Equipment for sports a	nd hobbies	_1	
	Examples: Sports, photo and kayaks;	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes carpentry tools; musical instruments		
		elliptical exercise machine at flea market value used	\$	75.00
	☑ No	shotguns, ammunition, and related equipment	ş.	
	Yes. Describe		\$	0.00
	Clothes <i>Examples:</i> Everyday clot ☑ No	hes, furs, leather coats, designer wear, shoes, accessories	1	
	Yes. Describe	normal wearing apparel at used store value	\$	525.00
	yold, sliver	elry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,		
	Yes. Describe	wedding ring, earrings, costume jewelry at pawn shop value used	\$	225.00
13.	lon-farm animals			
i	Examples: Dogs, cats, bir	rds, horses		
(☐ No			
į	Yes. Describe	family pet(dog) no cash value	\$	0.00
4. A	any other personal and	household items you did not already list, including any health aids you did not list		
_	☐ No			
	Yes. Give specific information.	vacuum(UCFS) microwave, dishes, sofa, end tables, iron, lamps pawnshop valu	\$	150.00
5. A f	Add the dollar value of a or Part 3. Write that nur	all of your entries from Part 3, including any entries for pages you have attached nber here	\$	3,070.00

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Debtor 1

Stacie L McCray Pace First Name Middle Name

Last Name

Case number (if known)__

Part 4:

Describe Your Financial Assets

Do you own or have an	ly legal or equitable interest in	any of the following?		Current value portion you Do not deduct or exemptions.	own? secured claim
16. Cash	to bours in vour wellet in a season by				
□ No	u nave in your wailer, in your noi	me, in a safe deposit box, and on hand when you	file your petition		
			Cash:	\$	65.00
and other	savings, or other financial accor similar institutions. If you have n	unts; certificates of deposit; shares in credit union nultiple accounts with the same institution, list eac	s, brokerage houses, h.		
☐ No ☑ Yes					
		Institution name:			
	17.1. Checking account:	Chase Bank #2328		\$	75.00
	17.2. Checking account:			\$	
	17.3. Savings account:	Chase Bank #1008		\$	15.00
	17.4. Savings account:			\$	
	17.5. Certificates of deposit;			\$	
	17.6. Other financial account:	-		\$	
	17.7. Other financial account:			\$	
	17.8. Other financial account:				
	17.9. Other financial account;			\$ \$	
					/
18. Bonds, mutual funds,	or publicly traded stocks				
Examples: Bond funds,	investment accounts with broke	rage firms, money market accounts			
☑ No ☐ Yes	Institution or issuer name:				
	monation of issuer hame.				
				\$	
				\$	
				D	
19. Non-publicly traded stan LLC, partnership, a	tock and interests in incorpora	ated and unincorporated businesses, including	g an interest in		
Ø No	Name of entity:	·	6 of ownership:		
Yes. Give specific information about	-		0% %	¢	
them			0% %	\$	
	And the second s		O%%	\$	

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Stacie L McCray Pace Debtor 1 Case number (if known)_ First Name Middle Name Last Name

Non-negotiable instrum			
✓ No✓ Yes. Give specific	Issuer name:		
information about			
them			\$
			\$
	***************************************		\$
Retirement or pension	a accounts		
		401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
☑ No	•	() () profiles it along the control period of profiles it along plans	
Yes. List each			
account separately.	Type of account:	Institution name:	
	401(k) or similar pla	n:	\$
	Pension plan:		¢
	IRA:		\$
			\$
	Retirement account:		\$
	Keogh:		\$
	Additional account:		æ
			Ф <u></u>
Your share of all unused	deposits you have	made so that you may continue service or use from a company	\$ \$
Your share of all unused Examples: Agreements of companies, or others	prepayments deposits you have		\$\$
Your share of all unused Examples: Agreements of companies, or others No	prepayments I deposits you have with landlords, prep	made so that you may continue service or use from a company	\$
Your share of all unused Examples: Agreements of companies, or others No	prepayments I deposits you have with landlords, prep	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications	\$
Your share of all unused Examples: Agreements of companies, or others No	prepayments I deposits you have with landlords, prepa	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications	\$\$
Your share of all unused Examples: Agreements to companies, or others No	prepayments I deposits you have with landlords, prep	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications name or individual:	\$\$ \$
Your share of all unused Examples: Agreements of companies, or others No	prepayments I deposits you have with landlords, prepared landlords. Electric: Gas: Heating oil:	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications name or individual:	\$\$ \$\$
Your share of all unused Examples: Agreements of companies, or others No	prepayments I deposits you have with landlords, prepared landlords. Electric: Gas: Heating oil:	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications name or individual:	\$\$ \$
Your share of all unused Examples: Agreements of companies, or others No	prepayments I deposits you have with landlords, prepared to the prepared to th	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications name or individual:	\$\$ \$\$
Your share of all unused Examples: Agreements of companies, or others No	prepayments I deposits you have with landlords, prepayments Electric: Gas: Heating oil: Security deposit on repaid rent: Telephone:	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications name or individual:	\$\$ \$\$
Your share of all unused Examples: Agreements of companies, or others No	prepayments I deposits you have with landlords, prepared to the second of the second o	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications institution name or individual:	\$\$ \$\$ \$\$
Your share of all unused Examples: Agreements of companies, or others No	prepayments I deposits you have with landlords, prepayments Electric: Gas: Heating oil: Security deposit on repaid rent: Telephone: Water: Rented furniture:	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications name or individual:	\$\$ \$\$ \$\$ \$\$ \$
Your share of all unused Examples: Agreements of companies, or others No	prepayments I deposits you have with landlords, prepared to the second of the second o	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications institution name or individual:	\$\$ \$\$ \$\$ \$\$
Your share of all unused Examples: Agreements wompanies, or others No Yes	prepayments I deposits you have with landlords, prepayments I deposits you have with landlords, prepayments Electric: Gas: Heating oil: Security deposit on recognity deposit d	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications institution name or individual:	\$\$ \$\$ \$
Your share of all unused Examples: Agreements to companies, or others No Yes	prepayments I deposits you have with landlords, prepayments I deposits you have with landlords, prepayments Electric: Gas: Heating oil: Security deposit on recognity deposit d	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications institution name or individual:	\$\$ \$\$ \$
Your share of all unused Examples: Agreements to companies, or others No Yes	prepayments I deposits you have with landlords, prepayments Electric: Gas: Heating oil: Security deposit on reprepaid rent: Telephone: Water: Rented furniture: Other:	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications institution name or individual: ental unit: of money to you, either for life or for a number of years)	\$\$ \$\$ \$
Examples: Agreements of companies, or others No Yes	prepayments I deposits you have with landlords, prepayments I deposits you have with landlords, prepayments Electric: Gas: Heating oil: Security deposit on recognity deposit d	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications institution name or individual: ental unit: of money to you, either for life or for a number of years)	\$\$ \$\$ \$

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Debtor 1

Stacie L McCray Pace

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First Name Middle Name

Last Name

Case number (if known)_

24. in 2	terests in an education IRA 6 U.S.C. §§ 530(b)(1), 529A(b	in an a), and 5	ccount in a qualified ABLE program, or under a qualifie 29(b)(1).	ed state tuition progra	m.	
	1 No	**				
	1 vaa	Institutio	on name and description. Separately file the records of any	interests.11 U.S.C. § 52	21(c):	
						\$
						\$
						\$
25. Tr	rusts, equitable or future into cercisable for your benefit	erests ir	property (other than anything listed in line 1), and righ	nts or powers		
E	No					
	Yes. Give specific information about them			NA-AAT MININ IN MATERIA, SPE IN IN MATERIA MININTERPRITATION AND INSTITUTE OF THE PARTY OF THE P		\$
26. P a	atents, copyrights, trademar kamples: Internet domain nam	ks, trad es, webs	e secrets, and other intellectual property sites, proceeds from royalties and licensing agreements	and the second s		
	No					
	Yes. Give specific information about them					\$
27. Li c	censes, franchises, and other	er gener	al intangibles			
	No	iusive iic	enses, cooperative association holdings, liquor licenses, pr	rofessional licenses		
	Yes. Give specific	/-T-hathard				
	information about them					\$
	y or property owed to you? K refunds owed to you					Current value of the portion you own? Do not deduct secured claims or exemptions.
	No.					
	Yes. Give specific information	า	2016 tax refund			4.500.00
	about them, including w you already filed the reti	hether	Expected 2017 tax refund	Federal:	\$_	1,599.00
	and the tax years		(unknown)	State:	\$_	
				Local:	\$	
Exa	mily support amples: Past due or lump sum No	alimony	r, spousal support, child support, maintenance, divorce settl	lement, property settlen	nent	
	Yes, Give specific information	1,		1000		
				Alimony:	\$	
				Maintenance:	9)
			<u>:</u>	Support:	\$	
				Divorce settlement:	\$	
10 10+	er amounts someone owes			Property settlement:	ā	
Exa	amples: Unpaid wages, disabil Social Security benefi	ity insura	ance payments, disability benefits, sick pay, vacation pay, vd loans you made to someone else	workers' compensation,		
u	Yes. Give specific information					
					\$	

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Debtor 1

Stacie L McCray Pace First Name Middle Name

Last Name

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3	 Interests in insurance policies Examples: Health, disability, or life insura No 	ance; health savings account (HSA); credit, homeowner's, or renter's insurance	
	Yes. Name the insurance company of each policy and list its value.	Company name:	Beneficiary:	Surrender or refund value:
				\$
				\$
32	2. Any interest in property that is due you If you are the beneficiary of a living trust, property because someone has died. No Yes. Give specific information	u from someone who has di expect proceeds from a life in		
	Tes. Give specific information			\$
33	B. Claims against third parties, whether on Examples: Accidents, employment disputed No No Yes. Describe each claim	r not you have filed a lawsu es, insurance claims, or rights	to sue	
				\$
34	to set on claims	ms of every nature, including	g counterclaims of the debtor and rights	
	No Yes. Describe each claim.	Americanism of March 1974 and the American American State of the Confess of the C		and March and
	Tes. Describe each claim.			\$
	Any financial assets you did not already No Yes. Give specific information			\$
36	Add the dollar value of all of your entrie for Part 4. Write that number here	es from Part 4, including any	entries for pages you have attached	s1,754.00
Pa	Describe Any Business-l	Related Property You	Own or Have an Interest In. List any I	eal estate in Part 1.
37.	Do you own or have any legal or equitab	ole interest in any business-	related property?	
	No. Go to Part 6.		, and a property .	
	Yes. Go to line 38.			
				Current value of the portion you own? Do not deduct secured claims or exemptions.
	Accounts receivable or commissions yo	u already earned		
	☑ No			
	Yes. Describe			
	Office equipment, furnishings, and supp Examples: Business-related computers, software		achines, rugs, telephones, desks, chairs, electronic devices	
	Yes. Describe)
		nigh f f f f f f f f f f f f f f f f f f f		\$

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Debtor 1

Stacie L McCray Pace First Name Middle Name

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade **1** No Yes. Describe...... 41. Inventory No No Yes. Describe... 42. Interests in partnerships or joint ventures Yes. Describe...... Name of entity: % of ownership: 43. Customer lists, mailing lists, or other compilations Med No ☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? Yes. Describe..... 44. Any business-related property you did not already list M No ☐ Yes. Give specific information 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached 0.00 for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish M No ☐ Yes.....

Case 17-38057 Doc 1-1 Filed 12/27/17 Entered 12/27/17 11:40:57 Page 19 of 63 attach correct PDF Stacie L McCray Pace Debtor 1 First Name Middle Name 48. Crops—either growing or harvested ☑ No Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade **2** No ☐ Yes..... 50. Farm and fishing supplies, chemicals, and feed **☑** No **Q** Yes..... 51. Any farm- and commercial fishing-related property you did not already list 2 No ☐ Yes. Give specific information..... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached 0.00 for Part 6. Write that number here Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership **2** No ☐ Yes. Give specific information...... 54. Add the dollar value of all of your entries from Part 7. Write that number here 0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 0.00 56. Part 2: Total vehicles, line 5 11,455.00 3,070.00 57. Part 3: Total personal and household items, line 15 1,754.00 58. Part 4: Total financial assets, line 36 0.00 59. Part 5: Total business-related property, line 45 0.00 60. Part 6: Total farm- and fishing-related property, line 52 61. Part 7: Total other property not listed, line 54 0.00 16,279.00 Copy personal property total → 62. Total personal property. Add lines 56 through 61. 16,279.00

63. Total of all property on Schedule A/B. Add line 55 + line 62.

16,279.00

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Fill in this in	formation to ide	entify your case:		
Debtor 1	Stacie L McC	ray Pace		
Debtor 2	First Name N/A	Middle Name	Last Name	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	lankruptcy Court fo	or the: Northern District of III	inois	
Case number (If known)	***************************************		M	

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you
----	--

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief descripti Schedule A/B	ion of the property and line on that lists this property	Current value of the portion you own	Amount of the exemption you claim	
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	2014 Hyundai Sonat	\$ <u>11,455.00</u>	3 \$ 2,400.00	735-5/12-1001(c)
Line from Schedule A/B;	3.1		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	household goods	\$ <u>1,635.00</u>	□ \$ 1,635.00	735-5/12-1001(b)
Line from Schedule A/B:	6		100% of fair market value, up to any applicable statutory limit	
Brief description:	electronics	\$ <u>295.00</u>	□ \$ <u>295.00</u>	735-5/12-1001(b)
Line from Schedule A/B:	7		100% of fair market value, up to any applicable statutory limit	

3.	Are v	you clai	mina a i	homestead	exemption	of more	than	\$160	3752

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

I No

- Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
 - ☐ No
 - Yes

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Debtor 1

Stacie L McCray Pace

Case number (if known)_

Part 2:

Additional Page

Brief descrip on Schedule	otion of the property and line A/B that lists this property	Current v	alue of the ou own	Amount o	f the exemption you claim	Specific laws that allow exemption
		Copy the Schedule	value from A/B	Check onl	y one box for each exemption	
Brief description:	bible, school books	\$	165.00	3	165.00	735-5/12-1001(b)
Line from Schedule A/B	. <u>8</u>			100% any a	of fair market value, up to oplicable statutory limit	
Brief description:	hobby/ elliptical	\$	75.00	O \$	75.00	735-5/12-1001(b)
Line from Schedule A/B	9				of fair market value, up to oplicable statutory limit	
Brief description:	clothing	\$	525.00	□ \$	525.00	735-5/12-1001(a)
Line from Schedule A/B.	11			100% any ar	of fair market value, up to plicable statutory limit	
Brief description:	jewelry	\$	225.00	□ s	225.00	735-5/12-1001(b)
Line from Schedule A/B:	12				of fair market value, up to plicable statutory limit	
Brief description:	other personal prop	\$	150.00	- \$	150.00	735-5/12-1001(b)
Line from Schedule A/B:	14				of fair market value, up to plicable statutory limit	
Brief description:	cash in wallet	\$	65.00	□ \$	65.00	735-5/12-1001(b)
Line from Schedule A/B:	<u>16</u>				of fair market value, up to plicable statutory limit	
Brief description:	Chase Bank #2328	\$	75.00	- \$	75.00	735-5/12-1001(b)
Line from Schedule A/B:	<u>17.1</u>				of fair market value, up to plicable statutory limit	W. (1994)
Brief description:	Chase Bank #1008	\$	15.00	a s	10.00	735-5/12-1001(b)
Line from Schedule A/B:	17.3			100% c any app	of fair market value, up to olicable statutory limit	
Brief description:	2016 tax refund	\$	1,599.00	3 1	,599.00	735-5/12-1001(b)
Line from Schedule A/B:	28				f fair market value, up to dicable statutory limit	
Brief description:	Expected 2017 tax	\$		2 (s		735-5/12-1001(6)
Line from Schedule A/B:	28			any app	f fair market value, up to dicable statutory limit	
Brief description:		\$	······································	Q \$		
Line from Schedule A/B:					f fair market value, up to licable statutory limit	
Brief description:		\$] \$		
Line from Schedule A/B:					f fair market value, up to licable statutory limit	

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Fill in this information to identify your ca	Se:			
Debtor 1 Stacie L McCray Pace				
First Name Middle	Name Last Name			
Debtor 2 IV/A (Spouse, if filing) First Name Middle	Name Last Name			
United States Bankruptcy Court for the: Northern	District of Illinois			
Case number (if known)			☐ Chec	k if this is an
				ded filing
Official Form 106D				
Schedule D: Creditor	s Who Have Claims Secur	ed by Prop	erty	12/15
Be as complete and accurate as possible	. If two married people are filing together, both are o	aually rannanaihle f		vet
information. If more space is needed, cop additional pages, write your name and ca	V tile Additional Page. Till it out inumber the entrice	and attach it to this	form. On the top	of any
and carrie and ca	se namber (ii knowit).			
1. Do any creditors have claims secured i	by your property?			
No. Check this box and submit this for	m to the court with your other schedules. You have noth	ing else to report on t	his form.	
Yes. Fill in all of the information below.				
Parties List All Secured Claims				
List Air Secured Claims				
2. List all secured claims. If a creditor has n	nore than one secured claim, list the creditor separately	Column A Amount of claim	Column B	Column C
for each claim. If more than one creditor h	as a particular claim, list the other creditors in Part 2. nabetical order according to the creditor's name.	Do not deduct the	Value of collateral that supports this	Unsecured portion
	iabetical order according to the creditor's name.	value of collateral.	claim	If any
^{2.1} Fifth Third Bank	Describe the property that secures the claim:	\$20,768.00	s 11,455.00	9,313.00
Creditor's Name	2014 Hyundai Sonata			· ·
5050 Kingsley Dr				
	As of the date you file, the claim is: Check all that apply.	J		
	Contingent			
Cincinnati OH 45263 City State ZIP Code	Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or secured			
Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)	-		
community debt				
Date debt was incurred 06/13/2014	Last 4 digits of account number 9 5 8 8			
AcceptanceNow	Describe the property that secures the claim:	_{\$} 126.00	\$ 0.00	s 0.00
Creditor's Name	used bed			, v
5501 Headquarters Dr				
5400	As of the date you file, the claim is: Check all that apply.			
	Contingent			
Plano TX 75024	☐ Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only Debtor 1 and Debtor 2 only	car loan) Statutory fien (such as tax lien, mechanic's fien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
	Other (including a right to offset) credit use			
community debt				
Date debt was incurred 08/30/2014	Last 4 digits of account number 7 0 2 0			
Add the dollar value of your entries in C	olumn A on this page. Write that number here:	20,894.00	етій — на терене се на денте на дополнения на наданеров не дополож выдательной на наданеров.	on produced to a copy or properties that the production of the

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Debtor 1 Stacie L McCray Pace	Case nu	mber (# known)				
First Name Middle Name	Last Name	TIDOI (I KIIOWII)				
Additional Page Part 1: After listing any entries on this by 2.4, and so forth.	page, number them beginning with 2.3, followed	Column A Amount of cl Do not deduct	the	that s	e of collateral supports this	Column C Unsecured portion
2.3 AcceptanceNow	Describe the property that secures the claim:	value of collate 2,64		claim	1,050.00 _s	If any 1.590.00
Creditor's Name		·,		\$	1,000.00 \$	1,000,00
5501 Headquarters Dr Number Street	king bdrm, mattress, dresser/mirror, twinXL boxspring					
Plano TX 75024 City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	ad.				
	Disputed					
Who owes the debt? Check one.	Nature of lien. Check all that apply.					
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured car loan)					
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)					
At least one of the debtors and another	Judgment lien from a lawsuit Other (including a right to offset) Credit use					
Check if this claim relates to a community debt	Other (including a right to offset)	-				
Date debt was incurred	Last 4 digits of account number 2 8 1 5					
2.4 United Consumer Financial SVC Creditor's Name	Describe the property that secures the claim:	\$636	3.00	\$	50.00 \$	586.00
865 Bassett Rd	used vacuum					
Number Street						
	As of the date you file, the claim is: Check all that apply.					
Westlake OH 44145	Contingent					
City State ZIP Code	Unliquidated Disputed					
Who owes the debt? Check one.	·					
Debtor 1 only	Nature of lien. Check all that apply.					
Debtor 2 only	An agreement you made (such as mortgage or secured					
Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)					
At least one of the debtors and another	Judgment lien from a lawsuit					
Check if this claim relates to a community debt	Other (including a right to offset) credit use					
Date debt was incurred 11/29/2015	Last 4 digits of account number 6 6 4 9					
e en		est (settembre) kalled og tilsent årstemengspossense op	insisis anima muca	ortite outstanderfin	i kanenaan en	potentine i sensione social esta e passione a vestica e
Creditor's Name	Describe the property that secures the claim:	5		\$	\$	
Number Street						
	As of the date you file, the claim is: Check all that apply.					
	Contingent					
City State ZIP Code	Unliquidated Disputed					
Who owes the debt? Check one.	Nature of lien. Check all that apply.					:
Debtor 1 only	An agreement you made (such as mortgage or secured)					:
Debtor 2 only	car loan)					
Debtor 1 and Debtor 2 only	 Statutory lien (such as tax lien, mechanic's lien) 					
At least one of the debtors and another	Judgment lien from a lawsuit					
Check if this claim relates to a community debt	Other (including a right to offset)					:
Date debt was incurred	Last 4 digits of account number					
Add the dollar value of your entries	In Column A on this page. Write that number here:	3,276	00			
	add the dollar value totals from all pages.	24,170				

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Debtor 1

Stacie L McCray Pace

irst Name Middle Name Last Name

Case number (#known)

racing is maind to collect lifell ADD If	to be notified abou or a debt you owe to	It your bankruptcy fo o someone else, list of you listed in Part 1	or a debt that you already listed in Part 1. For example, if a collection the creditor in Part 1, and then list the collection agency here. Similarly, if , list the additional creditors here. If you do not have additional persons to
AcceptanceNow			On which line in Part 1 did you enter the creditor? $\frac{2.3}{}$
Name			Last 4 digits of account number 2 8 1 5
4380 East New York St			
Aurora	IL	60504	
City	State	ZIP Code	-
Fifth Third Bank	e et e e e e e e e e e e e e e e e e e	ertholombie bet deithige annam fearann fearag diolombie ann an dha an ann araigna fha a	On which line in Part 1 did you enter the creditor? 2.1
Name 38 Fountain Square Plaza			Last 4 digits of account number 9 5 8 8
Number Street			
Cincinnati	ОН	45202	
City	State	ZIP Code	
			On which line in Part 1 did you enter the creditor?
Name			Last 4 digits of account number
Number Street			
City	State	ZIP Code	
			On which line in Part 1 did you enter the creditor?
Name			Last 4 digits of account number 9 4 2 5
Number Street			
City	State	ZIP Code	
т в того ст. ст. 19.5 дд. од досерод се у восени от веденда да досерод в од од рад тобором се в 1942 ж.д. от т	ter en men en en entre alle en entre entre en	th da mar eigeneach e macht, daoith an 1864 (1864 (1864), a gann ag girman	On which line in Part 1 did you enter the creditor?
Name			Last 4 digits of account number
Number Street			_
City	State	ZIP Code	- -
The state of the common terms and the common payments of the production of the common common payments are common to the common terms and the common terms are common to the common terms and the common terms are common to the common terms are	er til der var de trefte å de kommen som som præsenter, en genges gengen er	ettiidees et koop dat et eedd ti kootiine. De samatta titteepe op tysje gegeneg oo ji	On which line in Part 1 did you enter the creditor?
Name			Last 4 digits of account number
Number Street			-
			_
City	Stata	71D Codo	•

Case 17-38057 Filed 12/27/17 Entered 12/27/17 11:40:57 Doc 1-1 attach correct PDF Page 25 of 63 Fill in this information to identify your case: Stacie L McCray Pace Debtor 1 First Name N/A Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an (If known) amended filing Official Form 106F/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). **List All of Your PRIORITY Unsecured Claims** Part 1: 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority Nonpriority amount amount **EFS Finance** 2 P A 0 \$ 4,030.00 \$ 4,030.00 \$ Last 4 digits of account number 0.00Priority Creditor's Name 604 Locust St When was the debt incurred? 09/24/2008 Number As of the date you file, the claim is: Check all that apply Des Moines IA 50319 Contingent State Unfiguidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated Is the claim subject to offset? 🗹 No Other. Specify Yes **Nelnet Loan Services** Last 4 digits of account number 2,128.00 \$ 2,128.00 \$ 3 3 1 0.00 Priority Creditor's Name 02/06/2008 3015 S Parker Rd Ste 400 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Aurora CO 80014 Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim is for a community debt intoxicated Is the claim subject to offset? Other. Specify ☑ No

Yes

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Priority Creditor's Name 3015 S Parker Rd Ste 400 Number Street Aurora CO 80014 Dity State ZIP Code Who incurred the debt? Check one.	Last 4 digits of account number 7 3 3 1 \$ 650.00 \$ 650.00 \$ 0.0 When was the debt incurred? 07/14/2008 As of the date you file, the claim is: Check all that apply.
Aurora CO 80014 City State ZIP Code	As of the date you file, the claim is: Check all that apply. ☐ Contingent
City State ZIP Code	☐ Contingent
City State ZIP Code	☐ Contingent
City State ZIP Code	
Vho incurred the debt? Check one.	Unliquidated
	☐ Disputed
☑ Debtor 1 only	Type of PRIORITY unsecured claim:
Debtor 2 only	Domestic support obligations
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government
At least one of the debtors and another	Claims for death or personal injury while you were
Check if this claim is for a community debt	intoxicated Other. Specify
s the claim subject to offset?	Onici. Specify
₫ No	
☐ Yes	
JS Dept of Ed/ GLELSI	
riority Creditor's Name	Last 4 digits of account number 0 6 7 9 \$_1,140.00 \$_1,140.00 \$_0.00
2401 International LN	When was the debt incurred? 06/22/2009
umber Street	The state of the s
	As of the date you file, the claim is: Check all that apply.
Madison WI 53704	Contingent
ity State ZIP Code	Unliquidated
/ho incurred the debt? Check one.	☐ Disputed
Debtor 1 only	Type of PRIORITY unsecured claim:
Debtor 2 only	Domestic support obligations
Debtor 1 and Debtor 2 only At least one of the debtors and another	Taxes and certain other debts you owe the government
	Claims for death or personal injury while you were
Check if this claim is for a community debt	intoxicated Other. Specify
the claim subject to offset?	And the second s
No	
Tyes	
S Dept of Ed/ GLELSI	0 6 7 0 -57 000 00 7 000 00
ority Creditor's Name	Last 4 digits of account number 0 6 7 9 \$57,868.00 \$7,868.00 \$ 0.00
401 International LN	When was the debt incurred? 09/11/2009
mbei Steet	the of the date yes, tile the state of
adicas and a second	As of the date you file, the claim is: Check all that apply.
adison WI 53704 y State ZIP Code	☐ Contingent ☐ Unliquidated
2 211 0000	☐ Disputed
ho incurred the debt? Check one.	
Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:
Debtor 1 and Debtor 2 only	Domestic support obligations
At least one of the debtors and another	Taxes and certain other debts you owe the government
Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated
The same same a community dept	Other. Specify
the claim subject to offset?	
No Yes	

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Part 2:

List All of Your NONPRIORITY Unsecured Claims

3.	Do any creditors have nonpriority under the No. You have nothing to report in the Yes			the court with your other schedules.			
3.1.7	List all of your nonpriority unsecured nonpriority unsecured claim, list the credit included in Part 1. If more than one credit claims fill out the Continuation Page of	ditor sepa	rately for each cla a particular claim	Il order of the creditor who holds e im. For each claim listed, identify who list the other creditors in Part 3 If you	of himo of alabar is in Manager	s more t	han one
4.1	Alexian Bros Medical Center				0 0 0 ==	Tota	l claim
	Nonpriority Creditor's Name			Last 4 digits of account number		\$	170.00
	800 Biesterfield Rd			When was the debt incurred?	02/18/2016	T	
	Elk Grove Village	IL State	60007 ZIP Code	As of the date you file, the claim	is: Check all that apply.		
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only			Contingent Unliquidated Disputed Type of NONPRIORITY unsecu			
•	At least one of the debtors and another Check if this claim is for a commu Is the claim subject to offset? No			 Student loans Obligations arising out of a separathat you did not report as priority Debts to pension or profit-sharing Other, Specify medical 	claims	ı	
4.2	Yes Aurora Emergency Associates	h vil sterligt ein eitster VI kalantstad 19. des aus Va	44-milyer tali alikenia Astilifiyane talihiyan iliyok iliyok ilikulinin kalikuliya yaya ya ja	Last 4 digits of account number	6 3 8 7	e parjand alterno de deserved.	891.00
	Nonpriority Creditor's Name 1325 N Highland Ave Number Street			When was the debt incurred?	03/29/2016	4	
	Aurora City	IL	60506	As of the date you file, the claim i	s: Check all that apply.		
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	State	ZIP Code	Contingent Unliquidated Disputed			
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecur	ed claim:		
	☐ At least one of the debtors and another☐ Check if this claim is for a commun	nity debt		 Student loans Obligations arising out of a separathat you did not report as priority or 	tion agreement or divorce		
	Is the claim subject to offset? ☑ No ☑ Yes			Debts to pension or profit-sharing Other. Specify medical	plans, and other similar debts		
4.3	Aurora University		t de little of the Port Section Section of Association of Association (Association) and the section of the section of	Last 4 digits of account number	ritoriitiit teritoriin aseasisiin tarakkiin tarakkiin tarakkiin tarakkiin tarakkiin aasaa sa sa siiseeta kiitu <u>6 _ 3 _ 8 _ 7</u>	et angrowed without the considering	Therefore is becoming a recomming at least account specification of
	Nonpriority Creditor's Name 347 Gladstone Ave Number Street			_	10/26/2016	\$	3,017.00
	Number Street Aurora City	IL State	60506 ZIP Code	As of the date you file, the claim is	s: Check all that apply.		:
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	Cidio	Zii Gode	Contingent Unliquidated Disputed			
	Debtor 1 and Debtor 2 only At least one of the debtors and another			Type of NONPRIORITY unsecure	ed claim:		
				Student loans			
	☐ Check if this claim is for a commun is the claim subject to offset? ☐ No	ity debt		Obligations arising out of a separat that you did not report as priority of Debts to pension or profit-sharing p	aims		
	Yes			Other. Specify <u>Credit use</u>	, and only official deots		

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ж.	- 410	100	
	-	11	-
М×	Bittor.	all bal	House

Capital One/ Helzberg D	iamond		Last 4 digits of account number 3 7 2 1	\$1,069.0	
Nonpriority Creditor's Name P O Box 30257			When was the debt incurred? 12/24/2015		
Number Street Salt Lake City	UT	84130	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	□ Contingent		
Who incurred the debt? Check of	300		Unliquidated		
Debtor 1 only	nie.		☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			Student loans		
At least one of the debtors and	another		Obligations arising out of a separation agreement or divorce that		
$oldsymbol{\square}$ Check if this claim is for a c	ommunity debt		you did not report as priority claims		
s the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit use		
☑ No ☑ Yes					
antinoson di krainda di dang kalintan kang sirika terminika kenang na menggah di melandi kenala da selanda gad Men	retur de la filono de temperatura esta presença de se por esta de la filono de la filono de la filono de la fi	AS ARRAMENTAL VICTORIS PARAMENTAL CONTRACTOR (SANTONIO SERVICE) SERVICE ARRAMENTAL CONTRACTOR CONTR		ertsplate ett eftertimte entottakken folkertsprichet	
Capital One FSB Ionpriority Creditor's Name			Last 4 digits of account number 8 8 1 1	\$0.0	
P O Box 30257			When was the debt incurred? 11/12/2002		
lumber Street					
Salt Lake City	UT	84130	As of the date you file, the claim is: Check all that apply.		
aty	State	ZIP Code	Contingent		
Vho incurred the debt? Check of	ne.		☐ Unliquidated ☐ Disputed		
Debtor 1 only					
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
At least one of the debtors and a	nother		Student loans		
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
Check if this claim is for a co	mmunity debt		Debts to pension or profit-sharing plans, and other similar debts		
the claim subject to offset?			Other. Specify notice only		
No Yes					
EP America Illinois	Egopet til der flyt i den kolleder i ventetten ekste flyttette til flytte skile ekste flytte	etiretikerinen (Artikeritikeritikeritikeritikeritikeritikeritikeritikeritikeritikeritikeritikeritikeritikeriti	Last 4 digits of account number 6 3 8 7	\$ 485.00	
onpriority Creditor's Name					
100 Powell St			When was the debt incurred? 11/21/2016		
umber Street Meryville	CA	94608	As of the date you file, the claim is: Check all that apply.		
ty	State	ZIP Code	Contingent		
the incurred the series of	_		Unliquidated		
The incurred the debt? Check on Debtor 1 only	e.		☐ Disputed		
Debtor 1 only Debtor 2 only			Type of MONDDIODITY areas and all the		
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim: Student loans		
At least one of the debtors and ar	other		☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that		
Check if this claim is for a co	mmunity debt		you did not report as priority claims		
the claim subject to offset?	•		☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify medical		
			Ciner Specify Hittilical		

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Debtor 1

Part 2:

				100000000000000000000000000000000000000	
Chase Bank/ Amazon Nonpriority Creditor's Name			Last 4 digits of account number 6 5 5 7	\$ 586	
P O Box 15298			When was the debt incurred? 05/12/2016		
Number Street Wilmington	DE	19850	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed		
Debtor 1 only			Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 onlyAt least one of the debtors and another			☐ Student loans		
			Obligations arising out of a separation agreement or divorce that		
☐ Check if this claim is for a commu	nity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offset?			Other. Specify Credit use		
☑ No ☑ Yes					
	Olivelinia e pri relación en la munta y la esplacación en la constante y la esplacación de la espla	SERE PHÁ MHÁ THÝ ĐỘU THẬ CHỰ CHẬC MẠC THỰCH ĐƯƠCH THÝ THÝ THÝ THÝ THÝ THÝ THÝ THÝ THÝ TH	tankentaminen rejekstääli kunnattaminyksenii, kuississi vanaaja mohreedusekseniinen vanaa vanaisi inkonossassaa aasaanaa koikisinen sii eleksensassaa kallisinen sii eleksensassaa aasaa kallisinen sii eleksensassaa	talomata is attigation projective projective constraint	
ChexSystems Nonpriority Creditor's Name			Last 4 digits of account number 6 3 8 7	\$C	
7805 Hudson Rd Ste 100			When was the debt incurred? 08/31/2017		
Woodbury	MN	55125	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt? Check one.			Unliquidated		
Debtor 1 only			☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			☐ Student loans		
At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that		
Check if this claim is for a communication	nity debt		you did not report as priority claims		
ls the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts Other. Specify notice only		
☑ No			Callet Opecary Hotaso Stary		
Yes					
Comenity Bank/ Ashstwrt	and the second section of the second section in the second section is a second section in the second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section is a second section in the second section in the second section is a section in the section in the section is a section in the section in the section is a section in the section in the section is a section in the section in the section is a section in the section in the section is a section in the section in the section is a section in the section in the section in the section is a section in the section in the section is a section in the section in the section is a section in the section in the section is a section in the section in the section in the section is a section in the section in the section in the section is a section in the section in the section in the section in the section is a section in the section is a section in the section	ті сен желінді кісін тірін і тре кіріндір де уденсі тефі ү ез айдын ексенсізінісі деніденсізін	Last 4 digits of account number 0 6 5 1	_{\$} 900	
Nonpriority Creditor's Name					
P O Box 182273			When was the debt incurred? 01/10/2016		
Number Street Columbus	ОН	43218	As of the date you file, the claim is: Check all that apply.		
City	State	43218 ZIP Code	Contingent		
Ada - 2			Unliquidated		
Who incurred the debt? Check one.			☐ Disputed		
Debtor 1 only Debtor 2 only			T (NONDELODITY		
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
At least one of the debtors and another			Student loans Obligations printing out of a case of the same of t		
Check if this claim is for a commun	ity debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
s the claim subject to offset?	-		 Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit use 		
☑ No ☑ Yes			Omer. Specify Credit use		

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Debtor 1

Comcast/ Xfinity			Last 4 digits of account number 0 3 6 2	s 459			
Nonpriority Creditor's Name P O Box 3002			When was the debt incurred? 08/31/2017	\$ 409			
Number Street		***************************************	when was the debt incurred?				
Southeastern	PA	19398	As of the date you file, the claim is: Check all that apply.				
City	State	ZIP Code	Contingent				
Who incurred the debt? Chec	k one.		☐ Unliquidated ☐ Disputed				
Debtor 1 only			- Disputed				
Debtor 2 only			Type of NONPRIORITY unsecured claim:				
Debtor 1 and Debtor 2 only At least one of the debtors ar	rd another		☐ Student loans				
			Obligations arising out of a separation agreement or divorce that				
Check if this claim is for a	•		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts				
is the claim subject to offset	?		Other, Specify Credit use				
☑ No ☑ Yes							
→ Yes							
Comenity Bank/ Pier 1	er termenten termenten til til het ekkeller i kallen petten petten per krisse	eta terretarro de la compositorio d	Last 4 digits of account number 2 5 6 1	. 4 55 4			
Nonpriority Creditor's Name	imports		ALLE STATE OF THE	\$ <u>1,554</u>			
P O Box 182125			When was the debt incurred? 03/18/2014				
Number Street Columbus	OH	43218	As of the date you file, the claim is: Check all that apply.				
City	State	ZIP Code	Contingent				
Who incremed the debto of the			Unliquidated				
Who incurred the debt? Check Debtor 1 only	cone.		☐ Disputed				
Debtor 2 only			Type of MONDDIODITY and a later				
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:				
At least one of the debtors and	d another		Student loansObligations arising out of a separation agreement or divorce that				
Check if this claim is for a	community debt		you did not report as priority claims				
Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts Other. Specify <u>Credit use</u>				
☑ No							
Yes							
	The forest the first the state of the state	Tri Yorkila iki kanada e awan wa ku mwaka 12 may ana kana ka ka maya ka manaka wa ka m		\$_1,321.			
Comenity Bank/ LNBrya Nonpriority Creditor's Name	int		Last 4 digits of account number 4 3 2 2				
P O Box 182273			When was the debt incurred? 02/07/2015				
Number Street	OH	10040	As of the date you file, the claim is: Check all that apply.				
Columbus	OH State	43218 ZIP Code					
•		Zii Code	Contingent Unliquidated				
Who incurred the debt? Check	one.		Disputed				
Debtor 1 only							
Debtor 2 only			Type of NONPRIORITY unsecured claim:				
Debtor 1 and Debtor 2 only At least one of the debtors and	l another		Student loans				
Check if this claim is for a			Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
Is the claim subject to offset?	4001		Debts to pension or profit-sharing plans, and other similar debts				
are eleuti aurilect in ottaet (Other, Specify Credit use				

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Comenity Bank/ RoomP	lace		Last 4 digits of account number 5 4 2 9	s 5,018		
Nonpriority Creditor's Name P O Box 182125			When was the debt incurred? 11/20/2014			
Number Street Columbus	ОН	42240	As of the date you file, the claim is: Check all that apply.			
City	State	43218 ZIP Code	Contingent			
Who incurred the debt? Check Debtor 1 only Debtor 2 only	one.	2.7 0030	Unliquidated Disputed			
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:			
☐ At least one of the debtors and	another		Student loans			
☐ Check if this claim is for a	ammunitu daht		Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	community dept		Debts to pension or profit-sharing plans, and other similar debts			
Is the claim subject to offset?			Other, Specify Credit use			
Yes						
Dupage Medical Group	ર્જનિવેશના પ્રાપ્તિએન વસ્તુના કારણ કરવા વારા કરવા છે. ત્યારે ત્યારે જ્યારે ત્યારે કારણ હતા છે. ત્યારે કારણ હતા	nti-Activitation suuriteiseete kiinisteleete täänisteleen si vessaavasta seeguvaja vastali	Last 4 digits of account number 6 3 8 7	s 6		
Nonpriority Creditor's Name				\$ <u>U</u>		
1100 31st St Ste 300 Number Street			When was the debt incurred? 02/01/2015			
Downers Grove	IL	60515	As of the date you file, the claim is: Check all that apply.			
City	State	ZIP Code	Contingent			
Who incurred the debt? Check of	sne		Unliquidated			
Debtor 1 only			☐ Disputed			
Debtor 2 only			Type of NONPRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only			Student loans			
At least one of the debtors and a	another		Obligations arising out of a separation agreement or divorce that			
Check if this claim is for a c	ommunity debt		you did not report as priority claims			
s the claim subject to offset?	-		Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical			
☑ No						
☐ Yes						
Oupage Medical Group	TTTELE એક સમ્માન્ટ કેમ્પ જિલ્લાદીઓની અને અંકારિકારિકારિકારિકારિકારિકારિકારિકારિકારિ	188 Polentilla (Principle and Carlo Alexandra de Polastico de S. 1860 per es es Prostecios de Artis pre	Last 4 digits of account number $\frac{6}{2}$ $\frac{3}{8}$ $\frac{8}{7}$	\$ <u>84</u>		
Nonpriority Creditor's Name						
1100 31st St Ste 300			When was the debt incurred? 02/01/2015			
Downers Grove	IL	60515	As of the date you file, the claim is: Check all that apply.			
City	State	ZIP Code	Contingent			
Who incurred the debt? Check or	ne.		Unliquidated			
Debtor 1 only			☐ Disputed			
Debtor 2 only			Type of NONPRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only			Student loans			
At least one of the debtors and a	nother		Obligations arising out of a separation agreement or divorce that			
Check if this claim is for a co	mmunity debt		you did not report as priority claims			
s the claim subject to offset?	•		Debts to pension or profit-sharing plans, and other similar debts			
No No			Other, Specify medical			

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Dupage Medical Group			Last 4 digits of account number 6 3 8 7		127,0		
Nonpriority Creditor's Name 1100 31st St Ste 300			When was the debt incurred? 07/01/2015	\$	127.0		
Number Street							
Downers Grove	IL.	60515	As of the date you file, the claim is: Check all that apply.				
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a commuls the claim subject to offset?		ZIP Code	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical				
Dupage Medical Group Nonpriority Creditor's Name	TOPE STORY OF THE	mente presionale de constitución de la constitución de la constitución de la constitución de la constitución d	Last 4 digits of account number 6 3 8 7 When was the debt incurred? 11/01/2016	\$	136.00		
1100 31st St Ste 300 Number Street	1						
Downers Grove	IL State	60515 ZIP Code	As of the date you file, the claim is: Check all that apply.				
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a communist he claim subject to offset? No Yes	nity debt		 Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other, Specify medical 				
Oupage Medical Group	ter te statistica de la proposición de	rrise rautisett ur tissä tärtävätävätävätävätävätävätävätävätävät	Last 4 digits of account number 6 3 8 7	**************************************	114.00		
Nonpriority Creditor's Name 1100 31st St Ste 300			When was the debt incurred? 11/01/2016				
Number Street Downers Grove	IL	60515	As of the date you file, the claim is: Check all that apply.				
ity	State	ZIP Code	☐ Contingent				
Who incurred the debt? Check one. Debtor 1 only			Unliquidated Disputed				
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:				
At least one of the debtors and another			Student loans Obligations addisposate (Control of the Control of				
Check if this claim is for a commun	ity debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
s the claim subject to offset? No Yes	•		☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify medical				

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Middle Name

Dupage Medical Group			Last 4 digits of account number 6 3 8 7	\$	60
Nonpriority Creditor's Name 1100 31st St Ste 300			When was the debt incurred? 11/01/2016	3	
Number Street Downers Grove	1L	60515	As of the date you file, the claim is: Check all that apply.		
City	IL. State	ZIP Code	□ Contingent		
Who incurred the debt? Check	one.		Unliquidated Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only At least one of the debtors and			Student loans		
			Obligations arising out of a separation agreement or divorce that		
Check if this claim is for a	community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offset?			Other. Specify medical		
☑ No ☐ Yes					
Discover Financial SVS	nt for the edit of two antiped to the first to the edit of the edi	et eksterijske kan estilijske krissional 1842 isligenter helijk helij de 2 festjohele eksteri	Last 4 digits of account number 1 3 3 3	***************************************	715
Nonpriority Creditor's Name	LLU	7		<u>\$_1,</u>	740
P O Box 15316			When was the debt incurred? 05/18/2016		
Wilmington	DE	19850	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt? Check	one.		Unliquidated		
Debtor 1 only			☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only At least one of the debtors and			☐ Student loans		
			Obligations arising out of a separation agreement or divorce that		
Check if this claim is for a	community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify <u>Credit use</u>		
Is the claim subject to offset?					
☑ No ☐ Yes					
	toures de la recompanie de commence la resugeixa de préparde el sui parce	erin marana kanan ka	+4 Program restate bloom facility of the Section of	Neomethymetries (2771)	107.
Edward Hospital			Last 4 digits of account number 6 3 8 7	\$	107.
Nonpriority Creditor's Name 801 S Washington St			When was the debt incurred?		
Number Street Naperville	IL	60540	As of the date you file, the claim is: Check all that apply.		
City	State	ZiP Code	☐ Contingent		
Who incurred the debt? Check of	one.		Unliquidated		
Debtor 1 only			Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only At least one of the debtors and	an ather		☐ Student loans		
			Obligations arising out of a separation agreement or divorce that		
☐ Check if this claim is for a c	ommunity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offset?			Other, Specify medical		

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Middle Name

Equifax			Last 4 digits of account number 6 3 8 7		0.
Nonpriority Creditor's Name P O Box 740241			When was the debt incurred? 08/31/2017	\$	U.
Number Street			***************************************		
Atlanta	GA	30374	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt? Che	ck one.		Unliquidated Disputed		
Debtor 1 only			☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			Student loans		
At least one of the debtors a	nd another		Obligations arising out of a separation agreement or divorce that		
☐ Check if this claim is for	a community debt		you did not report as priority claims		
Is the claim subject to offset	_		Debts to pension or profit-sharing plans, and other similar debts		
☑ No	•		Other. Specify notice only		
Yes					
The second contractions are a more contractions and a more contraction and the contrac	nt de Sontin-en de volument quantitud graph (1962) de l'19 dépossement quant la réport	erforde de la companya	Last 4 digits of account number $\frac{6}{3}$ $\frac{3}{8}$ $\frac{8}{7}$	ns accommendad de la companie de la	······································
Experian Nonpriority Creditor's Name			Last 4 digits of account number 0 0 0 1	\$	0.0
P O Box 2002			When was the debt incurred? 08/31/2017		
Number Street					
Allen	TX	75013	As of the date you file, the claim is: Check all that apply.		
City	State	ZJP Code	□ Contingent		
Who incurred the debt? Ched	sk one		Unliquidated		
Debtor 1 only	k utle.		☐ Disputed		
Debtor 2 only			Time of NONDPHODITY		
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
At least one of the debtors ar	id another		Student loans		
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
Check if this claim is for a			Debts to pension or profit-sharing plans, and other similar debts		
is the claim subject to offset	?		Other, Specify notice only		
☑ No					
Yes	aan ka	end sammely plu, making the space mount occurrence of sistening and full but		Definite Estimativa (instance in constru	in Street Annie
MidAmerica Bank and Toning Nonpriority Creditor's Name	Γrust/ Genesis I	Retail	Last 4 digits of account number 0 2 3 9	\$	0.0
P O Box 4499 Number Street			When was the debt incurred? 12/24/2015		
Beaverton	OR	97076	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
			Unliquidated		
Who incurred the debt? Check	cone.		☐ Disputed		
Debtor 1 only					
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only At least one of the debtors an	d another		Student loans		
			Obligations arising out of a separation agreement or divorce that		
Check if this claim is for a	community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
s the claim subject to offset?	•		Other. Specify notice only		
☑ No			The state of the s		

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Ninon C			* · · · · · ·				
Nicor Gas Nonpriority Creditor's Name			Last 4 digits of account number 6 3 8 7 \$ 700.0				
P O Box 2020			When was the debt incurred? 08/31/2017				
Number Street Aurora	IL	60507	As of the date you file, the claim is: Check all that apply.				
City	State	ZIP Code	Contingent				
Who incurred the debt? Check	one.		Unliquidated Disputed				
Debtor 1 only			Disputed				
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:				
At least one of the debtors and	another		☐ Student loans				
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
Check if this claim is for a c	ommunity debi		Debts to pension or profit-sharing plans, and other similar debts				
Is the claim subject to offset?			Other. Specify credit use				
Yes							
berry vigt verste for the state berrings by the State was to desired and state of the state of t	the equivalence to the things of the entire of the entire of the entire the entire to	HATHET PAR FOR STEAKER MY HOOF FOR MAKENDA MY LATERAL MIKE TO FEEL FOR THE FOR THE FOR THE FOR THE FOR THE FOR					
Reproductive Medicine In	stitute		Last 4 digits of account number 6 3 7 5 s 950.0				
Nonpriority Creditor's Name			When was the debt incurred? 01/13/2015				
2425 W 22nd St Ste 102 Number Street			- The was the dept incurred?				
Oak Brook	IL	60523	As of the date you file, the claim is: Check all that apply.				
City	State	ZIP Code	Contingent				
Who incurred the debt? Check or	ne.		Unliquidated				
Debtor 1 only			☐ Disputed				
Debtor 2 only			Type of NONPRIORITY unsecured claim:				
Debtor 1 and Debtor 2 only			Student loans				
At least one of the debtors and a			Obligations arising out of a separation agreement or divorce that				
Check if this claim is for a co	mmunity debt		you did not report as priority claims				
Is the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify_medical				
☑ No			The second secon				
Yes							
en en septembre en	4.8 g.m. ed. 27 met 174 de 2007, hy honis (gh. 413 ed. 2047, v. 1976 en him him h	t telek kurri silatak 10.000 atau mensionit en in silatak en trespertiana esseria di penjer	with an internal contract and the contra				
Synchrony Bank/ TJX CO Nonpriority Creditor's Name	PLCC		Last 4 digits of account number 9 5 3 2				
P O Box 965060 Number Street			When was the debt incurred? 03/04/2013				
Orlando	FL	32896	As of the date you file, the claim is: Check all that apply.				
City	State	ZIP Code	☐ Contingent				
Who incurred the debt? Check on	e.		Unliquidated				
Debtor 1 only			Disputed				
Debtor 2 only			Type of NONPRIORITY unsecured claim:				
Debtor 1 and Debtor 2 only At least one of the debtors and an			Student loans				
			Obligations arising out of a separation agreement or divorce that				
Check if this claim is for a cor	nmunity debt		you did not report as priority claims				
s the claim subject to offset? ☑ No ☑ Yes			Debts to pension or profit-sharing plans, and other similar debts Other. Specify <u>Credit use</u>				

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Middle Name

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Debtor 1

Aft	er listing any entries on this page,	number the	em beginning with	1 4.4, followed by 4.5, and so forth.	claim
28	Synchrony Bank/ Wal-mart			Last 4 digits of account number 6 7 7 2	255.00
	Nonpriority Creditor's Name P O Box 965060			When was the debt incurred? 05/12/2013	
	Number Street Orlando	FL	32896	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.			Unliquidated	
	Debtor 1 only			☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and anoth	^ *		☐ Student loans	:
				Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim is for a community debt			Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			Other. Specify credit use	1
	Yes				
29	territaria di si interneti in con e seno el monte in seno con este con este con este con este con este con est		Charles to the control of the charles of the control of the contro	ranteenengelekkinamingapuntaankunangi canataakunamingi palakanunankan kanataakunan kanataan kanataan kanataa kanata	i
	T.D. Bank USA/ Target Credit Nonpriority Creditor's Name			Last 4 digits of account number 7 8 1 3 \$ 1,6	15.00
	P O Box 673 Number Street			When was the debt incurred? 03/01/2015	
	Minneapolis	MN	55440	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed	
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?			☐ Disputed	
				Type of NONPRIORITY unsecured claim:	
				Student loans	:
				 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
				Debts to pension or profit-sharing plans, and other similar debts	
				Other. Specify credit use	
	Yes				
	Transunion			Last 4 digits of account number 6 3 8 7	0.00
	Nonpriority Creditor's Name			- Annual	
	P O Box 1000 Number Street			When was the debt incurred? 08/31/2017	
	Chester	PA	19022	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt			☐ Unliquidated ☐ Disputed	
				- Diaputeu	
				Type of NONPRIORITY unsecured claim:	•
				Student loans	:
				Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	
	s the claim subject to onset?			Other. Specify_notice only	
	Yes				*

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Debtor 1

Your NONPRIORITY Unsecured Claims — Continuation Page

ter listing any entries on this pa	ge, number th	em beginning wit	h 4.4, followed by 4.5, and so forth.	Total clai
[→] Verizon Wireless			Last 4 digits of account number 6 7 7 2	s 1,255.
Nonpriority Creditor's Name			When was the debt incurred? 05/12/2013	3
1 Verizon Way Number Street			when was the dept incurred?	
Basking Ridge	NJ	07920	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check o	.na		Unliquidated	
Debtor 1 only	nie.		☐ Disputed	
Debtor 2 only			Type of NONDRIODITY	
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and a	nother		Student loans Obligations arising out of a separation agreement or diverse that	
Check if this claim is for a co	ommunity daht		you did not report as priority claims	
Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	
No No			Other. Specify credit use	
Yes				
Edward Hospital/ Edward	Elmburet	file (Mellikok kesanzen silten voj vez erfen folososki zzzlá essekyvetssak	Last 4 digits of account number 8 7 4 1	s 1,564.
Nonpriority Creditor's Name	LITTIUI ST			\$ <u>1,004.</u>
801 S Washington St			When was the debt incurred? 06/08/2017	
Naperville	IL	60540	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check or			☐ Unliquidated	
Debtor 1 only	<i>ie.</i>		☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only				
At least one of the debtors and ar	nother		Student loans Obligations arising out of a separation agreement or diverse that	
Check if this claim is for a co	mmunity debt		you did not report as priority claims	
Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	
✓ No			☑ Other. Specify medical	
Yes				
- The material production of the state of th	organistic film for the content of t	escope-legiscity get justing gett nett man et er en minnette vestiller for et det titter 130 till treven	Last 4 digits of account number	
Nonpriority Creditor's Name			When was the debt incurred?	
Number Street			As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check one	е.		Unliquidated	
Debtor 1 only			Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and an	other		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a cor	nmunity debt		you did not report as priority claims	
Is the claim subject to offset?	•		Debts to pension or profit-sharing plans, and other similar debts	
□ No □ Yes			Other. Specify	

Debtor 1

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Part 3:

List Others to Be Notified About a Debt That You Already Listed

Account Resolution Serv		····	rsons to be notified for any debts in Parts 1 or 2, list On which entry in Part 1 or Part 2 did you list the original creditor?				
1643 North Harrison Pkw	o, Dida L	l Sto 100	Line A.2. In contract				
Number Street	/y blug r	1 Ste 100	Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims				
			Part 2: Creditors with Nonpriority Unsecured Clain				
Sunrise City	FL State	33323 ZIP Code	Last 4 digits of account number 4 3 9 1				
Credit Collection Service			On which only in Double or Double of the Control of				
Name		·	On which entry in Part 1 or Part 2 did you list the original creditor?				
P O Box 447	*******		Line 21 of (Check one): Part 1: Creditors with Priority Unsecured Claims				
Number Street			Part 2: Creditors with Nonpriority Unsecured				
N. I.			Claims				
Norwood City	MA State	02062 ZIP Code	Last 4 digits of account number 9 9 9 8				
Discover Financial Service	es. LLC	Compared to the Control of the Contr	On which entry in Part 1 or Part 2 did you list the original creditor?				
Vame			on this only in rait roll rait 2 did you list the original creditor?				
P O Box 30943		· · · · · · · · · · · · · · · · · · ·	Line 20 of (Check one): Deart 1: Creditors with Priority Unsecured Claims				
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims				
Salt Lake City	UT	84130					
Elly services and an amount of the common and a service of	State	ZIP Code	Last 4 digits of account number 1 3 3 3				
EFS Finance/ AES			On which entry in Part 1 or Part 2 did you list the original creditor?				
P O Box 61047			Line 2.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims				
Number Street		***************************************	Part 2: Creditors with Nonpriority Unsecured				
			Claims Claims				
Harrisburg Sty	PA State	17106 ZIP Code	Last 4 digits of account number 2 P A 0				
General Revenue Corp	Statement of Statement of Statement	terración (se promocero se escuente proceso e e e e e e	On which entry in Part 1 or Part 2 did you list the original creditor?				
lame							
1660 Duke Dr Ste 300			Line 4.3 of (Check one): Part 1: Creditors with Priority Unsecured Claims				
lumber Street			Part 2: Creditors with Nonpriority Unsecured Claims				
Mason	ОН	45040					
HV	State	ZIP Code	Last 4 digits of account number 5 0 0 2				
GLELSI/ Great Lakes Higl	ner Educ	ation	On which entry in Part 1 or Part 2 did you list the original creditor?				
O Box 7860			Line 2.5 of (Check one): Part 1: Creditors with Priority Unsecured Claims				
lumber Street			Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured				
***************************************			Claims Claims				
Madison _{Sity}	WI State	53707 ZIP Code	Last 4 digits of account number 0 6 7 9				
Miramed Revenue Group		ad to a section of the section of th	On which entry in Part 1 or Part 2 did you list the original creditor?				
lame							
360 E 22nd St lumber Street			Line 4.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims				
			Part 2: Creditors with Nonpriority Unsecured				
ombard	IL	60148					
ity	State	ZIP Code	Last 4 digits of account number 2 0 1 7				

Debtor 1

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Part 3:

List Others to Be Notified About a Debt That You Already Listed

Nationwide Credit &	Collection In		On which entry in Part 1 or Part 2 did you list the original creditor?
815 Commerce Dr S	Ste 270		Line 14 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 1: Creditors with Priority Unsecured Claims Part 1: Creditors with Nonpriority Unsecured Claims
Oak Brook	IL	60523	Last 4 digits of account number 9 1 9 3
and the state of t	State	ZIP Code	
Nationwide Credit & Name	Collection In	<u> </u>	On which entry in Part 1 or Part 2 did you list the original creditor?
815 Commerce Dr S	Ste 270		Line 15 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
Oak Brook	FI	00500	Claims
City	L State	60523 ZIP Code	Last 4 digits of account number 9 1 9 4
Nationwide Credit &	Collection Inc		On which entry in Part 1 or Part 2 did you list the original creditor?
Name 815 Commerce Dr S	to 070		
Number Street	ne 270		Line 16 of (Check one): Part 1: Creditors with Priority Unsecured Claims
			Part 2: Creditors with Nonpriority Unsecured Claims
Oak Brook	IL State	60523	Last 4 digits of account number 4 4 9 2
Nationwide Credit &	and the section of th	and the second s	On which control in Dark 1 and Dark 2 and
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
815 Commerce Dr S	te 270		Line 17 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Case ,			Part 2: Creditors with Nonpriority Unsecured Claims
Oak Brook	IL	60523	
City 	State	ZIP Code	Last 4 digits of account number 8 9 3 4
Nationwide Credit & (Collection Inc		On which entry in Part 1 or Part 2 did you list the original creditor?
815 Commerce Dr St	e 270		Line 18 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		***************************************	Part 2: Creditors with Nonpriority Unsecured
O.1. D			Claims
Oak Brook	IL. State	60523 ZIP Code	Last 4 digits of account number 8 9 3 5
Nationwide Credit & (de en en Primer (de en trades), establishede de de internet, per de la primer (en region)		On which entry in Part 1 or Part 2 did you list the original creditor?
Name 815 Commerce Dr Ste	^ 770		
Number Street	6 270		Line 19 of (Check one): Part 1: Creditors with Priority Unsecured Claims
			Part 2: Creditors with Nonpriority Unsecured Claims
Oak Brook	IL State	60523 ZIP Code	Last 4 digits of account number 8 9 3 6
Vationwide Credit & C	reformance of series of decimal participations of the series	oliennesse ett tittistis entrette visteriet hetter ett stimme en stim	
lame		***************************************	On which entry in Part 1 or Part 2 did you list the original creditor?
B15 Commerce Dr Ste	270		Line 21 of (Check one): Part 1: Creditors with Priority Unsecured Claims
			Part 2: Creditors with Nonpriority Unsecured
Dak Brook	IL	60523	
tv	State	ZIP Code	Last 4 digits of account number 9 9 9 8

Debtor 1

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Stacie L McCray Pace

Part 3:

List Others to Be Notified About a Debt That You Already Listed

Notact Loop Candas			cons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Nelnet Loan Services Name	····		On which entry in Part 1 or Part 2 did you list the original creditor?
P O Box 82505			Line 2.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			☐ Part 2: Creditors with Nonpriority Unsecured Claims
Lincoln	NE	68501	Last 4 digits of account number 7 3 3 1
City	State	ZIP Code	
Nelnet Loan Services			On which entry in Part 1 or Part 2 did you list the original creditor?
6420 Southpoint Pkwy			Line 2.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
Jacksonville	FL	32216	Last 4 digits of account number 7 3 3 1
City ctarens and an expression and an expression and a second a	State	ZIP Code	
Presence Mercy Medical	Center		On which entry in Part 1 or Part 2 did you list the original creditor?
1325 N Highland Ave	·		Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Aurora	IL	60506	Last 4 digits of account number 6 3 8 7
CI SC/ EES	State	ZIP Code	
SLSC/ EFS Name			On which entry in Part 1 or Part 2 did you list the original creditor?
P O Box 61047			Line 2.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber Street			Claims Part 2: Creditors with Nonpriority Unsecured
Harrisburg	PA	17106	Last 4 digits of account number 2 P A 0
	State	ZIP Code	
Stanislaus Credit Control			On which entry in Part 1 or Part 2 did you list the original creditor?
914 14th St			Line 6 of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber Street			Part 2: Creditors with Nonpriority Unsecured Claims
Viodesto	CA	95354	
Dity	State	ZIP Code	Last 4 digits of account number 1 9 6 7
Stanislaus Credit Control			On which entry in Part 1 or Part 2 did you list the original creditor?
O Box 480			Line 6 of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber Street		· · · · · · · · · · · · · · · · · · ·	Part 2: Creditors with Nonpriority Unsecured Claims
∕lodesto	CA	95353	Last 4 digits of account number 1 9 6 7

Number

Sioux Falls

3901 West 53rd St

Street

SD

57106

ZIP Code

Claims

Line 29 of (Check one): Part 1: Creditors with Priority Unsecured Claims

Last 4 digits of account number 7 8 1 3

Part 2: Creditors with Nonpriority Unsecured

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Debtor 1

Stacie L McCray Pace

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a	a. Domestic support obligations	6a.	\$0.00
from Part 1	6b	. Taxes and certain other debts you owe the government	6b.	\$65,816.00
	6c	. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d	. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$0.00
	6e	. Total. Add lines 6a through 6d.	6e.	\$ 65,816.00
				Total claim
Total claims	6f.	Student loans	6f.	s 3,017.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. -	+ _{\$}
	6j.	Total. Add lines 6f through 6i.	6j.	\$25,515.00

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Fil	l in this is	nformation to i	lantify.vav		1 2. 1 ago 12 of 00					
De	btor	Stacie L Mc		Aiddle Name Last Name						
	btor 2	N/A								
	ouse If filing)			Middle Name Last Name	•					
Un	ited States	Bankruptcy Court	for the: North	ern District of Illinois						
	se number known)					☐ Check if this is an				
	· · · · · · · · · · · · · · · · · · ·	······································		TRIPMINE.		amended filing				
Of	ficial F	Form 106	G							
Sc	:hedi	ule G: E	xecut	ory Contracts	and Unexpired Leases	12/15				
					filing together, both are equally responsible for supp					
IULOI	mation. I	र more space ।s	i needed, c	opy the additional page, fill i case number (if known).	t out, number the entries, and attach it to this page. C	in the top of any				
		,		sade Hamber (II Kilowii).						
				cts or unexpired leases?						
	No. C	heck this box ar	nd file this fo	rm with the court with your oth	er schedules. You have nothing else to report on this form	n.				
	Yes. F	Fill in all of the in	formation b	elow even if the contracts or le	eases are listed on Schedule A/B: Property (Official Form	106A/B).				
	List sepai example, unexpired	tetir' Actitote to	son or com ase, cell p	pany with whom you have the three panes. See the instructions for	he contract or lease. Then state what each contract of this form in the instruction booklet for more examples of	r lease is for (for executory contracts and				
	unexpired	i leases.								
1.			MAKKA K		Bet Meneral en en bet ek de kommen en bet en bet en beske kommen en en bet	Jerijana wakasaran kwa m				
	Person o	r company with	whom you	have the contract or lease	State what the contract or lease is fo					
	an Ragia Anno		e ta tega a a telefa	e e na 1,7 ki se a na diregistra di na na na ana ana ana ana ana ana ana a						
2.1	Accepta	anceNow			rental agreement/ non-residential	rental agreement/ non-residential				
	Name	ooday ortaro	5		used king bdrm, mattress, twinXL box	spring,				
	Number	eadquarters Street	Ur		dresser/mirror					
	Plano		TX	75024						
ert servengene	City	e george (see contact), demonstrate constitues participates of contact and contact and contact and contact and	State	ZIP Code						
2.2	Accepta	inceNow			rental agreement/ non-residential					
	Name				used bed					
	Number	eadquarters [Street)r							
	Plano		TX	75024						
e Serve Serving	City	to the factor to the contract of the contract	State	ZIP Code						
2.3	United (Consumer Fi	nancial S	ervices	sale contract/ used vacuum					
	Name									
	865 Bas	SSETT Ka Street								
	Westlak		ОН	44145						
ma modernia	City	nerson of the extension to see the constraint of	State	ZIP Code						
2.4	N/A									
i	Name		***************************************		Applies the state of the state					
ī	Number	Street	· · · · · · · · · · · · · · · · · · ·		The state of the s					
		0.000								
Partin sessiona	City	ernandan, man pajaganna karanja to atautaja ja ja ja ja j	State	ZIP Code		nna de destandención especialistica (no construir de la construir de la construir de la construir de la constr				
.5	N/A									
Ĭ	Vame			***************************************	Addition of the state of the st					
ī	Number	Street		·						
,	-GITIOCI	Oneer								
7	City		State	ZIP Code	W Town Addition of Mary					

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Fill i	n this information to identify y	our case:			
Debto	or 1 Stacie L McCray Pa	ace			
Date	First Name	Middle Name	Last Name		
Debto (Spous	se, if filing) First Name	Middle Name	Last Name		
United	d States Bankruptcy Court for the: No	orthern District of Illinois			
Case (If kno	number				
in mic					Check if this is ar
∩ffi	cial Form 106H				amended filing
	redule H: Your	C = al = l= 4 =			
					12/15
and nu	ing together, both are editally t	esponsible for supplying on the left. Attach the A	O COMPCT INTO MATION I	as complete and accurate as pos more space is needed, copy the age. On the top of any Additional	A alakista was 10 a.u 2011 21 a.u
	you have any codebtors? (if)	ou are filing a joint case,	do not list either spouse	as a codebtor.)	
	No Yes				
		lived in a community p	roperty state or territon	? (Community property states and t	ordina include
Ar	izona, California, Idano, Louisiai	na, Nevada, New Mexico,	Puerto Rico, Texas, Was	hington, and Wisconsin.)	ermones include
	No. Go to line 3.				
أسيا	Yes. Did your spouse, former s No	pouse, or legal equivalen	t live with you at the time	?	
		tate or territory did you live	2	. Fill in the name and current addre	:
	— 100. M White Collangency S	tate of territory and you live	# f	. Fill in the name and current addre	ss of that person.
	Name of your spouse, former spou	se, or legal equivalent			
	Number Street				
	City	State	ZIP Code		
sn Sc	own in line 2 again as a codeb	tor only if that person is Schedule E/F (Official F	a guarantor or cosigne	r if your spouse is filing with you. r. Make sure you have listed the c le G (Official Form 106G). Use So	reditor on
C	olumn 1: Your codebtor	ANSER DE LA COMPANSION DE			agent teachers are a second
				Column 2: The creditor to v	네트하다 그는 사람이라는 모든 것.
3.1	Kandice Pace			Check all schedules that ap	ply:
<u>.</u>	Vame			Schedule D, line 2.4	·····
_	4628 Baywood Dr			Schedule E/F, line	*******
_	Street Brunswick Dity	ОН	44212	Schedule G, line	-
2.2		State	ZIP Code		
	N/A Jame			Schedule D, line	-
-	lumber Street			Schedule E/F, line	•
P	lumber Street			☐ Schedule G, line	•••
ē	ity	State	ZIP Code	· · · · · · · · · · · · · · · · · · ·	
	V/A	· · · · · · · · · · · · · · · · · · ·		Schedule D, line	
N	ame			Schedule E/F, line	•
N	umber Street			☐ Schedule G, line	·
ō	ily	State	ZIP Code		-
			Contract the contract to the c	Control of the Contro	

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Fill in this information to identif	y your case:								
Debtor 1 Stacie L McCray	Pace		***************************************						
First Name	Middle Name	Last Name	*******						
Debtor 2 N/A (Spouse, if filing) First Name	Middle Name	Last Name							
United States Bankruptcy Court for the									
	, receive in product of march	>							
Case number (If known)					Check if	this is:			
						mended filing			
						pplement showing p ne as of the followin	ostpetition chapter 13		
Official Form 106I	_				-	DD / YYYY	y date.		
Schedule I: You	ur Income				ively[/	<i>557</i> 7111	12/15		
Be as complete and accurate as p supplying correct information. If y if you are separated and your spo separate sheet to this form. On the Part 1: Describe Employn	use is not filing with you e top of any additional p	ning jointly, and y	our sp	ouse i	s living with	you, include informa	ition about your spouse.		
Fill in your employment information.		Debtor 1				Debtor 2 or nor	Afiling spouse		
If you have more than one job,		444-brank dawn alam Company ang caleng a Alabertan da an malam	egeneswownieten	inimimoticacumani			1-ming shouse		
attach a separate page with information about additional employers.	Employment status		yed			☐ Employed ☐ Not employed			
Include part-time, seasonal, or			•			,,			
self-employed work. Occupation may include student or homemaker, if it applies.	Occupation	Registered N	lurse				William Company of the Company of th		
	Employer's name	Encompass	HH o	f the N	lidwest		***************************************		
	Employer's address	6688 N Cent		cpress	way				
		Number Street Ste 1300				Number Street			
							The second secon		
		Dallas		TV	75000		**************************************		
		City	State	TX e ZIP	75206 Code	City	State ZIP Code		
	How long employed the	•				Oity	State ZIP Code		
			-			and the second s			
Part 2: Give Details About	Monthly Income								
Estimate monthly income as of spouse unless you are separated.	the date you file this for	m. If you have noth	ing to :	eport fo	or any line, w	rite \$0 in the space. In	clude your non-filing		
If you or your non-filing spouse ha below. If you need more space, at	ive more than one employ tach a separate sheet to t	er, combine the info	ormatio	n for all	employers f	or that person on the li	ines		
				For	Debtor 1	For Debtor 2 or non-filing spouse			
List monthly gross wages, sala deductions). If not paid monthly,	ary, and commissions (be calculate what the monthly	efore all payroll / wage would be.	2.	\$ 4	,819.32	enen er	en e		
3. Estimate and list monthly over	time pay.		3.	+ \$	0.00	+ \$			
4. Calculate gross income. Add lin	ne 2 + line 3.		4.	\$ <u>4</u>	,819.32	\$			

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Debtor 1

Stacie	L McCray Pace	
First Name	Middle Name	Last Name

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Case number (# known)___

		F	or Debtor 1	4 4		otor 2 or		
Copy line 4 here	→ 4	S	4,819.3	the state of the s	\$	iy spouse		
5. List all payroll deductions:		Ψ,	-	<u></u> -	Ψ			
5a. Tax, Medicare, and Social Security deductions	5a	. \$	821.7	7 6	\$			
5b. Mandatory contributions for retirement plans	5b.	. \$_	0.0	00				
5c. Voluntary contributions for retirement plans	5c.	. \$_	98.7	' 4				
5d. Required repayments of retirement fund loans	5d.	. \$	0.0	00				
5e. Insurance	5e.	. \$_	644.1	6				
5f. Domestic support obligations	5f.	\$_	0.0	00				
5g. Union dues	5g.	\$_	0.0	10	4			
5h. Other deductions. Specify:	5h.		17.5	— 50 -	+ s			
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$_	1,582.1		\$			
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	3,237.1	6	\$			
8. List all other income regularly received:								
8a. Net income from rental property and from operating a business, profession, or farm								
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$_	0.0	<u>0</u>	\$	***********		
8b. Interest and dividends	8b.	\$	0.0	0	\$			
 Family support payments that you, a non-filing spouse, or a dependent regularly receive 	nt	*		_	Ψ	70		
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_	0.0	0	\$			
8d. Unemployment compensation	8d.	\$_	0.00	0_	\$			
8e. Social Security	8e,	\$	0.00	<u>0</u>	\$	~~~		
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	ce 8f.	\$_	0.00)	\$			
8g. Pension or retirement income		•	0.00	- 1				
0	8g.	\$_			\$			
	8h.	+\$_	0.00) +	⁻ \$			
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_	0.00		\$			
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	3,237.16	+	\$	0.00	= s_	3,237.16
11. State all other regular contributions to the expenses that you list in Schedulinclude contributions from an unmarried partner, members of your household, you friends or relatives.	our de	epend						
Do not include any amounts already included in lines 2-10 or amounts that are n Specify:				enses li	sted in S	chedule J. 11. *	- s	0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The re Write that amount on the Summary of Your Assets and Liabilities and Certain Sta	esult	is the	combined m	nonthly	ncome.	12.	\$	3,237.16
13. Do you expect an increase or decrease within the year after you file this fo		11114		- appiidi	•	14.		nbined athly income
☑ No. ☐ Yes. Explain:		***************************************						

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Fill	in this information to identify	V Vour case:			
	tor 1 Stacie L McCray				
	First Name	Middle Name Last Name	Check if th	is is:	
	rtor 2 N/A use, if filing) First Name	Middle Name Last Name	An ame		
Unit	ed States Bankruptcy Court for the:	Northern District of Illinois	A suppl	ement showing pos es as of the followin	tpetition chapter 13
	e number		MM / DD		g uate.
[(n Ki	nown)		(viv.) DD	,, , , , , ,	
Off	icial Form 106J	_			
Sc	hedule J: Yo	ur Expenses			12/15
intorr	s complete and accurate as pr mation. If more space is need own). Answer every question	ossible. If two married people are fil led, attach another sheet to this forn	ing together, both are equally re n. On the top of any additional p	esponsible for supply ages, write your naπ	ring correct ne and case number
Part	Describe Your Hou	usehold			
1. is ti	his a joint case?				
	No. Go to line 2. Yes. Does Debtor 2 live in a s	separate household?			
	☐ No ☐ Yes. Debtor 2 must fil	e Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
2. Do	you have dependents?	□ No	m to magai, and, a feet m and an amenda and a feet from an	tin dat hatti di tindi suu muu suu suurun ya suurunga ya haada wa aa	and the second control of the second control
	not list Debtor 1 and otor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do nan	not state the dependents' nes.		daughter	<u>18</u>	☐ No ☑ Yes
					☐ No
					☐ Yes
				***************************************	☐ No ☐ Yes
					☐ No
					Yes
			**************************************		□ No
exp	your expenses include enses of people other than rself and your dependents?	☑ No ☑ Yes			☐ Yes
Part 2	Estimate Your Ongoin	ng Monthly Expenses		** * * ** * * * * * * * * * * * * * * *	
Estima	ate your expenses as of your	bankruptcy filing date unless you a	re using this form as a supplem	eut in a Chanter 13 c	ase to renort
expens	ses as of a date after the ban able date.	kruptcy is filed. If this is a suppleme	ental Schedule J, check the box	at the top of the form	and fill in the
Include	e expenses paid for with non	-cash government assistance if you	know the value of	<u>Anna da da</u>	
		it on Schedule I: Your Income (Office	•	Your exper	ISOS
any	rent for the ground or lot.	xpenses for your residence. Include	first mortgage payments and	4. \$	1,400.00
	ot included in line 4:				
4a.				4a. \$	0.00
4b.	Property, homeowner's, or re			4b. \$	0.00
4c.	Home maintenance, repair, a			4c. \$	0.00
4d.	Homeowner's association or	condominium dues		4d. \$	0.00

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Debtor 1

Stacie L McCray Pace
First Name Middle Name

Last Name

Case number (# known)___

National mortgage payments for your residence, such as home equity joans S S S S S S S S S				Your exp	Denses
6. Electricity, heat, natural gas 3 175,00	5	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6. Water, sewer, garbage collection 6. \$ 0.00	6.	Utilities:			
6.0 Water, sewer, garbage collection 6.0 \$ 265.00		6a. Electricity, heat, natural gas	62	\$	175.00
6. Telephone, cell phone, internet, satelitie, and cable services 6. 2, 265,000		6b. Water, sewer, garbage collection		£	
2		6c. Telephone, cell phone, Internet, satellite, and cable services		\$	
7. Food and housekeeping supplies 7. \$ \$.00000000000000000000000000000000				\$	
8. Childcare and children's education costs 8. \$ 0.00 9. Clothing, laundry, and dry cleaning 9. \$ 75.00 10. Personal care products and services 10. \$ 65.00 11. Medical and dental expenses 11. \$ 3.50.00 12. Transportation, Include gas, maintenance, bus or train fare. 12. \$ 220.00 13. Entertainment, clubs, recreetion, newspapers, magazines, and books 13. \$ 0.00 14. Charitable contributions and religious donations 14. \$ 0.00 15. Insurance. 15. No include insurance deducted from your pay or included in lines 4 or 20. 15b. Health insurance 15s. \$ 0.00 15c. Vehicle insurance 15s. \$ 0.00 15d. Other insurance. Specify 15c. Vehicle insurance 15c. \$ 0.00 15d. Other insurance. Specify 15c. Vehicle insurance 15c. \$ 0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. Vehicle insurance 15c. \$ 0.00 17. Installment or lease payments: 17c. Other, Specify 17c. Other, Specify 20c. 0.00 17. Coller, Specify 17c. Other, Specify 20c. 0.00 17. Other, Specify 20c. 0.00 20c. 0.00 17. Other, Specify 20c. 0.0	7,			\$	
9. Clothing, laundry, and dry cleaning 9. \$ 5,75.00 10. Personal care products and services 10. \$ 65.00 11. Medical and dental expenses 11. \$ 3.00 12. Transportation, include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ 220.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.00 14. Charitable contributions and religious donations 14. \$ 0.00 15. Insurance. 15. \$ 0.00 15. Insurance deducted from your pay or included in lines 4 or 20. 15. \$ 0.00 15. Vehicle insurance 15. \$ 0.00 <td>8.</td> <td>Childcare and children's education costs</td> <td></td> <td>e</td> <td></td>	8.	Childcare and children's education costs		e	
10	9.	Clothing, laundry, and dry cleaning		\$	
11. Medical and dental expenses 11. \$ 35.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ 220.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.00 14. Charitable contributions and religious donations 14. \$ 0.00 15. Insurance. 15. \$ 0.00 15. Life insurance 15. \$ 0.00 15. Life insurance 15. \$ 0.00 15. Life insurance 15. \$ 0.00 15. Vehicle insurance 15. \$ 0.00 15. Vehicle insurance 15. \$ 0.00 15. Vehicle insurance \$ 0.00 15. Vehicle insurance \$ 0.00 15. Other insurance \$ 0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$ 0.00 Specify: 17. \$ 0.00 17. Car payments for Vehicle 2 17. \$ 0.00 <t< td=""><td>10.</td><td></td><td></td><td>\$</td><td>***************************************</td></t<>	10.			\$	***************************************
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ 220,000 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.00 14. Charitable contributions and religious donations 14. \$ 0.00 15. Insurance. 15. Insurance. 15. \$ 0.00 15. Issurance 15. \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 15. Health insurance 15. \$ 0.00	11.			\$	
12	12.	Transportation. Include gas, maintenance, bus or train fare.		·	
1.4. Charitable contributions and religious donations 14. \$ 0.00 15. Insurance. 15. Life insurance 15. \$ 0.00 15. Life insurance 15. \$ 0.00 15. Health insurance 15. \$ 0.00 15. Vehicle insurance 15. \$ 0.00 15. Vehicle insurance. Specify: 15. \$ 0.00 16. Other insurance. Specify: 15. \$ 0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.00 17. Installment or lease payments: 17. \$ 0.00 17. Car payments for Vehicle 1 17. \$ 5.00 17. Car payments for Vehicle 2 17. \$ 0.00 17. Other. Specify: 17. \$ 0.00 17. Other. Specify: 17. \$ 0.00 17. Other. Specify: 17. \$ 0.00 17. Other specify: 17. \$ 0.00 17. Other specify: 17. \$ 0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106). 18. \$ 0.00 19. Other payments you make to support others who do not live with you. 5 0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 0		Do not include car payments.	12.	\$	220.00
15. Insurance. 15. Insurance 15. 15. 16. 16.	13.		13.	\$	0.00
Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance	14.	Charitable contributions and religious donations	14.	\$	0.00
15b. Health insurance 15b. S. 0.00 15c. Vehicle insurance 15c. S. 145.00 15d. Other insurance. Specify: 15d. S. 0.00 16d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. S. 0.00 17. Installment or lease payments: 17a. S. 540.00 17b. Car payments for Vehicle 1 17a. S. 540.00 17b. Car payments for Vehicle 2 17b. S. 0.00 17c. Other. Specify: 17c. Specify: 17c. Specify: 17d. Other. Specify: 17d. Specify: 17d. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. Specify: 19. Specify: 19. Other payments you make to support others who do not live with you. Specify: 19. Specify: 20.00 20. Mortgages on other property 20a. Mortgages on other property 20a. Specify: 0.00 20b. Real estate taxes 20b. Specify: 0.00 20c. Property, homeowner's, or renter's insurance 20c. Specify: 0.00 20d. Maintenance, repair, and upkeep expenses 20d. Specify: 0.00	15.				
15b. Health insurance 15b. S 0.00 15c. Vehicle insurance 15c. S 145.00 15d. Other insurance. Specify: 15d. S 0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 16. S 0.00 17c. Installment or lease payments: 17a. S 540.00 17b. Car payments for Vehicle 1 17a. S 540.00 17c. Other. Specify: 17c. S 0.00 17d. Other. Specify: 17c. Specify: 17c. Specify: 0.00 17d. Other. Specify: 17d. Schedule I, Your Income (Official Form 106I). 18. Society: 0.00 19. Other payments you make to support others who do not live with you. 18. Specify: 19. Society: 0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Society: 0.00 20b. Real estate taxes 20b. Scale estate taxes 20b. Scale estate taxes 0.00 20c. Property, homeowner's, or renter's insurance 20c. Scale estate taxes 20c. Scale estate taxes 20c. Scale estate taxes 20d. Maintenance, repair, and upkeep expenses 20d. Scale estate taxes 20d. Scale estate taxes 20d. Scale estate taxes		15a. Life insurance	15a	\$	0.00
15c. Vehicle insurance 15c. S 145.00 15d. Other insurance. Specify: 15d. S 0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 16c. Specify: 16c. S 0.00 17. Installment or lease payments: 17a. C ar payments for Vehicle 1 17a. S 540.00 17b. Car payments for Vehicle 2 17b. C ar payments for Vehicle 2 17c. Other. Specify: 17c. S 0.00 17c. Other. Specify: 17c. Other. Specify: 17c. S 0.00 17d. Other. Specify: 17d. S 0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. S 0.00 19. Other payments you make to support others who do not live with you. 5 0.00 20a. Mortgages on other property 20a. S 0.00 20b. Real estate taxes 20b. S 0.00 20c. Property, homeowner's, or renter's insurance 20c. S 0.00 20d. Maintenance, repair, and upkeep expenses 20d. S 0.00		15b. Health insurance		\$	
15d. Other insurance. Specify: 15d. \$ 0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.00 17. Installment or lease payments: 17a. \$ 540.00 17b. Car payments for Vehicle 1 17a. \$ 540.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: 17c. \$ 0.00 17d. Other. Specify: 17d. \$ 0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ 0.00 19. Other payments you make to support others who do not live with you. Specify: 19. \$ 0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. \$ 0.00 20a. Mortgages on other property 20a. \$ 0.00 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00		15c. Vehicle insurance		\$	
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:		15d. Other insurance. Specify:		\$	***************************************
Specify: 16. \$ 0.00 17. Installment or lease payments: 17a. \$ 540.00 17a. Car payments for Vehicle 1 17a. \$ 0.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: 17c. \$ 0.00 17d. Other. Specify: 17d. \$ 0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ 0.00 19. Other payments you make to support others who do not live with you. \$ 0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00	16	Taxos Do not include toyon deducted for			
17a. Car payments for Vehicle 1 17a. \$ 540.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other, Specify:	10.		16.	\$	0.00
17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify:	17.	Installment or lease payments:			
17c. Other. Specify:		17a. Car payments for Vehicle 1	17a.	\$	540.00
17d. Other. Specify:		17b. Car payments for Vehicle 2	17b.	\$	0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses		17c. Other, Specify:	17c.	\$	0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ 0.00 19. Other payments you make to support others who do not live with you. Specify: 19. \$ 0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses		17d. Other. Specify:	17d.	\$	0.00
Specify:	18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
Specify:	19.	Other payments you make to support others who do not live with you.			
20a. Mortgages on other property 20a. \$		·	19.	\$	0.00
20a. Mortgages on other property 20a. \$	20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ie.		
20b. Real estate taxes 20b. \$				\$	0.00
20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00		20b. Real estate taxes			
20d. Maintenance, repair, and upkeep expenses 20d. \$		20c. Property, homeowner's, or renter's insurance			
		20d. Maintenance, repair, and upkeep expenses			0.00
		20e. Homeowner's association or condominium dues		_	

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Debtor	1 Stacie L McCray Pace First Name Middle Name Last Name Case numb	er (if known)		
21. O 1	her. Specify: school loans	21.	+\$	200.00
22. C a	iculate your monthly expenses.			
22	a. Add lines 4 through 21.	22a.	\$	3,498.00
22	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$	0.00
22	c. Add line 22a and 22b. The result is your monthly expenses.	22c.	\$	3,498.00
23. Cal	culate your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,237.16
23b.	Copy your monthly expenses from line 22c above.	23b.	\$	3,498.00
23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	\$	-260.84
24. Do :	ou expect an increase or decrease in your expenses within the year after you file this forn	1?		
For	example, do you expect to finish paying for your car loan within the year or do you expect your gage payment to increase or decrease because of a modification to the terms of your mortgage?			
2	· · ·			
	es. Explain here:			

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		а	attach correct PD	F Page 49 of 63		
Fill in this	information to identify	y your case:				
Debtor 1	Stacie L McCray	Pace				
	First Name N/A	Middle Name	Last Name			
Debtor 2 (Spouse, if filin		Middle Name	Last Name	TO THE PROPERTY AND		
United States	s Bankruptcy Court for the	: Northern District o	of Illinois			
Case numbe	·		ALL			
					☐ Che	ck if this is an
						ended filing
O46:-:-	- L III 400D					
	al Form 106D					
Dec	laration A	bout an	Individual	Debtor's Sch	nedules	12/15
If two ma	rried meanly and Situati	441 1 41				
ii two iiid	med beoble are ming	together, both are	e equally responsible for	supplying correct informatio	n.	
years, or	both. 18 U.S.C. §§ 152 Sign Below	., 1341, 1319, and	3571.			
Did yo	u pay or agree to pay	someone who is	NOT an attorney to help	you fill out bankruptcy forms	2	
☑ No			The state of the s	you im our bankiupicy forms	ſ	
				. Attach Bankruptcy Petition Pr Signature (Official Form 119).	reparer's Notice, Declaration, and	
tilat (r)	penalty of perjury, I d	eclare that I have ct.		schedules filed with this decla	ration and	
*	Mal	7	⊁ _{N/A}			

Signature of Debtor 2

Date _____

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Fill in this	information to ide	ntify your case:				
Debtor 1	Stacie L McCr					
Debtor 2	N/A	Middle Name	Last Name			
(Spouse, if filin		Middle Name	Last Name			
		the: Northern District of I	Illinois			
Case number (If known)			AMAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA			☐ Check if this is an
						amended filing
Official	Form 107					
***************************************		ancial Affair	rs for Indiv	/iduals Filin	g for Bankrupto	V 04/16
Be as complinformation. number (if kr	ete and accurate a If more space is n nown). Answer eve	s possible. If two marri leeded, attach a separa	ied people are filin te sheet to this fo	g together, both are e rm. On the top of any a	qually responsible for suppi additional pages, write your	
	our current marit					
🗹 Marri						
☐ Not n						
	List all of the places	you lived in the last 3 ye	Dates Debtor 1 lived there	where you live now. Debtor 2:		Dates Debtor 2 lived there
				☐ Same as Debtor 1		Same as Debtor 1
Nur	mber Street		From	Number Street		From
-			То	- Turnios Offeet		То
City	,	State ZIP Code		City	State ZIP Code	
				Same as Debtor 1		Same as Debtor 1
			From			From
Nun	nber Street		То	Number Street		To
*************************************						-
City		State ZIP Code		City	State ZIP Code	
				ŕ		
 Within the states and No 	e last 8 years, did ; I territories include i	you ever live with a spo Arizona, California, Idaho	ouse or legal equiv o, Louisiana, Nevad	alent in a community a, New Mexico, Puerto	property state or territory? (Rico, Texas, Washington, and	Community property I Wisconsin.)
	laka cura yay fill ay	t Schedule H: Your Code	obtom (Official Fra			
Yes. N	iane sule you lill ou	L SCHBQUJB M. YOUF COM	SOIOIS IOHICIAI EOM	1 1(16H)		
Ŭ Yes. №	iake sure you iiii ou	t Scriedale H, Your Coae	eotors (Official Forfi	1 106H).		

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From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Operating a business	ebtor 1	Stacie L McCray Pace		Conn		
Prom January 1 of current year until the date you filed for bankruptcy:		First Name Middle Name La	ast Name	Case ne	JITIDET (If Known)	
Sources of Income Check all that apply Chestor 2	If you	r the total amount of income you receiv u are filing a joint case and you have in No	ed from all jobs and all bus	inesses, includina part-ti	me activities	endar years?
Sources of income Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips Operating a business	121 Y	es. Fill in the details.	Part of the control o			
Check all that apply. Sources, ips Coperating a business S. 37,054.00 Check all that apply. Wages, commissions, bonuses, tips Operating a business S. 37,054.00 Check all that apply. Wages, commissions, bonuses, tips Operating a business S. 37,054.00 Check all that apply. Wages, commissions, bonuses, tips Operating a business S. 37,054.00 Check all that apply. Wages, commissions, bonuses, tips Operating a business S. 37,054.00 Wages, commissions, bonuses, tips Operating a business S. 37,054.00 Wages, commissions, bonuses, tips Operating a business S. 37,054.00 Wages, commissions, bonuses, tips Operating a business S. 37,054.00 Wages, commissions, bonuses, tips Operating a business S. 37,054.00 Wages, commissions, bonuses, tips Operating a business S. 37,054.00 Wages, commissions, bonuses, tips S. 37,054.00 Wages, commissions, b			Debtor 1		Debtor 2	
From January 1 of current year until the date you filled for bankruptcy: Wages, commissions, bonuses, tips Operating a business				(before deductions and		(before deductions and
For last calendar year: (January 1 to December 31,2016 (Wages, commissions, bonuses, tips Operating a business For the calendar year before that: (January 1 to December 31,2015 (Wages, commissions, bonuses, tips Operating a business S 59,827.00 Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony, child support; Social Security, unemployment, and other public benefit payments; pensions; rental income, interest, dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Distor 1 Sources of income Describe below. Cross income from each source (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Sources of income Describe below. Sources of income (brown each source (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2016) Very Sources of Income (brown each source) (before deductions and exclusions) Sources of Income (brown each source) Sou	1	From January 1 of current year until the date you filed for bankruptcy:	bonuses, tips	\$36,872.82	bonuses, tips	\$
Common of the calendar year before that: Common of the calendar			Operating a business		Operating a business	
Coperating a business Cope	ı	For last calendar year:		s 37 054 00	Wages, commissions,	_
Clanuary 1 to December 31, 2015 Clanuary 1 to December 31, 2015 Clanuary 1 to December 31, 2015 Clanuary 1 to December 31, 2016 Clanuary 1 to December 31, 2015 Clanuary 1 to December 32, 2015 Clanuary 2 to December 32, 2015 Clanuary 3 to December 34, 2015 Clanuary 4 to December 34, 2015	(\$		\$
Canuary 1 to December 31, 2015 Canuary 1 to December 31, 2015 Canuary 1 to December 31, 2015 Canuary 1 to December 31, 2016 Canuary 1 to December 31, 2015	F	or the calendar year before that:			☐ Wages, commissions,	
Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest, dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No No No Sources of income Describe below. Debtor 1 Sources of income each source (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$, ,	\$ 59,827.00	bonuses, tips	\$
Debtor 1 Debtor 2	List ea	ach source and the gross income from				
Sources of income Describe below. Sources of income Describe below. From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31,2016 YYYY) For the calendar year before that: 401K \$ 1,112.00 \$	Proving.					
From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2016 YYYY) For the calendar year before that: (January 1 to December 21, 2015) (January 1 to December 21, 2015)			Debtor 1		Debtor 2	
the date you filed for bankruptcy: \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$			Describe below.	each source	Describe below.	each source
S S S S S S S S S S						exclusions)
For last calendar year: (January 1 to December 31,2016				§		exclusions)
(January 1 to December 31,2016				\$		exclusions) \$ \$
(January 1 to December 31,2016				\$		exclusions) \$ \$
For the calendar year before that: 401K \$ 1,112.00 \$ \$ (tanuary 1 to December 31 2015)	F	he date you filed for bankruptcy:		\$		exclusions) \$ \$ \$
/January 1 to Docombos 21 2015		or last calendar year: January 1 to December 31,2016	unemployment \$	13,708.00		\$\$ \$\$
/ January 1 to December 21 2015		or last calendar year: January 1 to December 31,2016	unemployment \$	13,708.00 755.00		\$\$ \$\$
	(,	he date you filed for bankruptcy: for last calendar year: January 1 to December 31,2016	unemployment \$ 401K \$	13,708.00 755.00		\$\$ \$\$ \$\$

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Debtor 1	Stacie L McCray					Case n	iumber (# know		
	First Name Middle	Name	Last Name		-	00001	TOTAL CITATION	***	
Part 3:	List Certain Pay	ments Y	ou Made Bel	fore You Filed	for Bank	ruptcy			
6. Are eit	her Debtor 1's or De	btor 2's d	lebts primarily	consumer deb	ts?				
☐ No	. Neither Debtor 1 r "incurred by an indi	vidual pini	namy for a pers	onai, ramily, or r	iousenoia p	ourpose."			(8) as
	During the 90 days	before you	u filed for bank	ruptcy, did you p	ay any crec	litor a total of	\$6,425* ог г	more?	
	No. Go to line 7								
	Yes. List below total amou	n you pan	a mai creditor.	ou paid a total of Do not include p not include payr	avments to	r dameetic eur	anari ahliga	tions ough as	
	* Subject to adjustn	ent on 4/0)1/19 and every	3 years after th	at for cases	attorney for tr	is bankrupt ter the date	of adjustment	
Yes	s. Debtor 1 or Debtor						ior and date	or adjustinent.	
	During the 90 days					itor a total of \$	600 or mor	e?	
	☐ No. Go to line 7				,,		.000 01 11101	o :	
	Yes. List below creditor. Do alimony. Al		ue pavillerus id	u paid a total of r domestic supp nts to an attorne	OIT ONLIGATIO	ine elleh se e	hild ouroad	ou paid that and	
				Dates of	Total amo	en e		you still owe	Was this payment for
				payment	TO SERVICE				
	Fifth Third B	ank		06/13/2014	\$	540.00	\$	20,768.00	☐ Mortgage
	5050 Kingsl	ov Dr							Car
	Number Street	Sy Di							Credit card
									Loan repayment
	Cincinnati	ОН	45263						☐ Suppliers or vendors
	City	State	ZIP Code						Other
					\$		\$		
	Creditor's Name						4		☐ Mortgage ☐ Car
	Number Street								☐ Car ☐ Credit card
									Loan repayment
				***************************************					Suppliers or vendors
	City	State	ZIP Code						Other
	,	Sisto	Zii Code						O(10)
	Creditor's Name			*****	\$	***************************************	\$		☐ Mortgage
	CLEGINOL & LYSTING								☐ Car
	Number Street								Credit card
	Number Street								☐ Credit card ☐ Loan repayment
	Number Street								

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First Name	IcCray Pace				O	
	Middle Name	Last Name			Case number (# know	7)
corporations of which	relatives; any ge h you are an office for a business yo	ineral partners; er. director, per:	relatives of a son in control	ny general partners	; partnerships of whi	who was an insider? ch you are a general partner; g securities; and any managing or domestic support obligations,
☑ No						
Yes. List all payn	nents to an inside	r.				
			Dates of payment		Amount you still owe	Reason for this payment
Insider's Name			*	_ \$	\$	
Number Street			-	w.		
				na		
City	State	ZIP Code	•			en e
Insider's Name			***************************************		_ \$	
				_		
Number Street				,		
						
City	State	ZIP Code		a		
ithin 1 year before n insider?	you filed for ban	kruptcy, did yo		payments or trans	sfer any property o	n account of a debt that benefited
ithin 1 year before n insider? clude payments on o	you filed for ban	kruptcy, did yo		payments or trans	sfer any property o	n account of a debt that benefited
ithin 1 year before n insider? clude payments on a	you filed for ban debts guaranteed	okruptcy, did yo		payments or trans	sfer any property o	n account of a debt that benefited
ithin 1 year before n insider? Iclude payments on a	you filed for ban debts guaranteed	okruptcy, did yo	an insider.	Alex gervere rassess	N. N. C.	
ithin 1 year before n insider? clude payments on a	you filed for ban debts guaranteed	okruptcy, did yo		payments or trans Total amount paid	N. N. C.	Reason for this payment
ithin 1 year before i insider? clude payments on o No I Yes. List all payme	you filed for ban debts guaranteed	okruptcy, did yo	an insider.	Total amount	N. N. C.	
ithin 1 year before i insider? clude payments on a	you filed for ban debts guaranteed	okruptcy, did yo	an insider.	Total amount	N. N. C.	Reason for this payment
ithin 1 year before n insider? clude payments on o No I Yes. List all payme	you filed for ban debts guaranteed	okruptcy, did yo	an insider.	Total amount	N. N. C.	Reason for this payment
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ithin 1 year before in insider? Clude payments on of No Yes. List all payments all payments insider's Name	you filed for bandebts guaranteed	or cosigned by	an insider.	Total amount paid	N. N. C.	Reason for this payment
ithin 1 year before in insider? Clude payments on of No Yes. List all payments all payments insider's Name	you filed for bandebts guaranteed	or cosigned by	an insider.	Total amount	N. N. C.	Reason for this payment
ithin 1 year before in insider? Iclude payments on of No Yes. List all payments all	you filed for bandebts guaranteed	or cosigned by	an insider.	Total amount paid	N. N. C.	Reason for this payment
fithin 1 year before in insider? Include payments on of the control of the contro	you filed for bandebts guaranteed	or cosigned by	an insider.	Total amount paid	N. N. C.	Reason for this payment

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Page 54 of 63 attach correct PDF Stacie L McCray Pace Debtor 1 Case number (if known) Middle Name Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. ☑ No Yes. Fill in the details. Nature of the case Status of the case Case title Pending Court Name On appeal Number Street ☐ Concluded Case number City ZIP Code Case title Pending Court Name On appeal Number Street Concluded Case number City State ZIP Code 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. Mo. Go to line 11, ☐ Yes. Fill in the information below. Describe the property Value of the property Creditor's Name Number Street Explain what happened Property was repossessed. Property was foreclosed. Property was garnished. City Property was attached, seized, or levied. State ZIP Code Describe the property Date Value of the property Creditor's Name

Number

City

Street

Explain what happened

ZIP Code

Property was repossessed.

Property was attached, seized, or levied.

Property was foreclosed. Property was garnished.

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г 1	Stacie L McCray Pace First Name Middle Name Last	Name Case number (# known)_	
	Last	verne	
Vith	in 90 days before you filed for bankru	otcy, did any creditor, including a bank or financial institut	tt
icco	ounts or refuse to make a payment bec	ause you owed a debt?	ion, set off any amounts from your
] \	es. Fill in the details.		
			g Silver to the service of great and have a company of
		Describe the action the creditor took	Date action Amount was taken
C	reditor's Name		
			1
N	umber Street		\$
			1
		The second of th	
č	ity State ZIP Code	Last 4 digits of account number: XXXX	
/ithi	in 1 year before you filed for bankrupto	ry, was any of your property in the possession of an assign	nno for the house!!
cui	tors, a court-appointed receiver, a cus	todian, or another official?	nee for the beliefit of
N			
) Y	es		
5:	List Certain Gifts and Contribut	ions	
ithii	2 Vears before you filed for bankrunt	cy, did you give any gifts with a total value of more than \$6	
1 N	^	by, did you give any gifts with a total value of more than \$6	300 per person?
	es. Fill in the details for each gift.		
* : 0	es. I'm in the details for each gift.		
•	Sifts with a total value of more than \$600	Describe the glifts	And the state of the state of the state of
ŗ	per person		Dates you gave Value the gifts
Pe	rson to Whom You Gave the Gift		\$
			<u> </u>
Nui	mber Street		
		: :	
City	/ State ZIP Code		
Pe	rson's relationship to you		
		3	
Gif	ts with a total value of more than \$600 person	Describe the gifts	Dates you gave Value
P			the gifts
Pen	son to Whom You Gave the Gift		<u> </u>
		i.	
			<u> </u>
		:	
Nun	nber Street		
City	State ZIP Code		
Pen	son's relationship to you		

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Stacie L McCray Pace

tor 1	Stacie L McCray P	ace	Cana averbas viv		
	First Name Middle Name	l	ast Name Case number (# known)		
Viti	hin 2 years before you file	d for bankr	uptcy, did you give any gifts or contributions with a total val	ue of more than \$6	600 to any charity?
	No				
	Yes. Fill in the details for ea		ontribution.		
	Gifts or contributions to cha	4 1 4 4	Describe what you contributed		Kani Makaka
	that total more than \$600			Date you contributed	Value
				•	¢
	Charity's Name				Ψ
					\$
ì	Number Street		and the second s		
	City State ZIP Code			:	
	,		. The state of th		
6	List Certain Losse	s			
ATTENNA N		· · · · · · · · · · · · · · · · · · ·			
	Describe the property you los how the loss occurred		Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
			claims of time 33 of Schedule AVB. Property.		
					\$
				:	
7	List Certain Paymen	ts or Trar	nsfers		
ith	in 1 year before you filed f	or bankrup	etcy, did you or anyone else acting on your behalf pay or tran	sfor any property	la anvene
ıu ı	consulted about seeking b	ankruptcy	or preparing a bankruptcy petition?		to anyone
		y petition pr	eparers, or credit counseling agencies for services required in yo	ur bankruptcy.	
N					
Y	es. Fill in the details.		A the establishment of the second state of the		
			Description and value of any property transferred	Date payment or	Amount of payment
ï	Person Who Was Paid			transfer was made	
_				•	
į	Number Street				\$
-					
			: !	<u> </u>	\$
Ĉ	City State	ZIP Code			
Ē	mail or website address				
7	Person Who Made the Payment if No	ot Vac			

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	st Name Case number (# known)	
All delivers being a second		
Attached part anny dy reach form of heady and describe the endough a phily of order property or a first anniholocule a settler or affice an environment of the endough of t	Description and value of any property transferred Date payment or	Amount of
	transfer was made	payment
Person Who Was Paid	——————————————————————————————————————	
		\$
Number Street	_ · · · · · · · · · · · · · · · · · · ·	Ψ
		¢
		Ψ
	_	
City State ZIP Code		
Email or website address	_	
Person Who Made the Payment, if Not You		
not include any payment or transfer that y	ou listed on line 16.	
Yes. Fill in the details.		
	and the control of th	eg errengig geriede
	Description and value of any property transferred Date payment or transfer was	Amount of payr
Person Who Was Paid	made	
. s.oor trio rao i ga		
Number Street		\$
****		\$
City State ZIP Code		\$
nin 2 years before you filed for bankrup	otcy, did you sell, trade, or otherwise transfer any property to anyone, other than	\$
hin 2 years before you filed for bankrup esferred in the ordinary course of your l	otcy, did you sell, trade, or otherwise transfer any property to anyone, other that business or financial affairs?	
hin 2 years before you filed for bankrup isferred in the ordinary course of your l ude both outright transfers and transfers n	business or financial affairs? nade as security (such as the granting of a security interest or mortgage on year area.	
hin 2 years before you filed for bankrup usferred in the ordinary course of your I ude both outright transfers and transfers n not include gifts and transfers that you have	business or financial affairs? nade as security (such as the granting of a security interest or mortgage on year area.	
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Debtor 1	Stacie L McCray Pace First Name Middle Name i	ast Name	Case number (if knot	wn)	The second secon
19. With are	nin 10 years before you filed for bank a beneficiary? (These are often called	cruptcy, did you transfer any prope a asset-protection devices.)	rty to a self-settled trus	t or similar device of v	hich you
	No Yes. Fill in the details.				
		Description and value of the prop	erty transferred		Date transfer was made
1	Name of trust			ere de la marie de Reix estimate (M. I.A.).	***************************************
					:
Part 8:	List Certain Financial Accoun	its, instruments, Safe Deposit	Boxes, and Storage	Units	Normannes et eller and annihans annihans repetition of all and annihans an arm any personal and a
20. With	in 1 year before you filed for bankru ed, sold, moved, or transferred?				benefit,
Inclu	ide checking, savings, money marke	et, or other financial accounts; certi	ficates of deposit; shar	es in banks, credit un	ons,
U N		eratives, associations, and other fir	nancial institutions.		
☐ Y	es. Fill in the details.		Najvasta kaj jaron kaj		
		Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
i	Name of Financial Institution	XXXX	☐ Checking	***	\$
i	Number Street		☐ Savings		
•	***************************************	nek.	☐ Money market ☐ Brokerage		
õ	City State ZIP Code	••	Other		
Ĩ	Name of Financial Institution		Checking		\$
_			☐ Savings		
P	Number Street	-	Money market		
M	White the second		☐ Brokerage		
ō	City State ZIP Code	-	Other		
21. Do yo	ou now have, or did you have within ities, cash, or other valuables?	1 year before you filed for bankrupt	cy, any safe deposit bo	x or other depository	for
Ø No	•				
∟i Ye	es. Fill in the details.		Section Control of the	and the second	A control of the second
		Who else had access to it?	Describe the c	ontents	Do you still have it?
					□ No
N	arne of Financial Institution	Name	M. M. Sydyn man (April 1994)		Yes
N	umber Street	Number Street			
_		City State ZIP Code	the state of the s		
2	ity State ZID Code	City State ZIP Code			•

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_{or 1} S <u>tacie L McCray</u> Pace	Casa number or	
First Name Middle Name	Last Name Case number (# know)	n)
lave you stored property in a stor No	age unit or place other than your home within 1 year before you fi	led for bankruptcy?
Yes. Fill in the details.		
	Who else has or had access to it? Describe the	LILLIA SAN KANASAWA SAN SAN SAN SAN SAN SAN SAN SAN SAN SA
	who else has or had access to it? Describe the	contents Do you st have it?
		
Name of Storage Facility	Name	□ No
		Yes
Number Street	Number Street	•
	City State 710 Co. J.	
<u> </u>	CityState ZIP Code	1
City State Zi	P Code	·
19: Identify Property Yo		
	u Hold or Control for Someone Else	
o you hold or control any proper	ty that someone else owns? Include any property you borrowed fi	rom, are storing for,
or hold in trust for someone. I No		- '
Yes. Fill in the details.		
- 100. Fin in the details.	Marie to the control of the state of the sta	
	Where is the property? Describe the p	Property Value
Owner's Name		
Owners rame		
		· •
Number Street	Number Street	• •
Number Street	Number Street	
Number Street		• • • • • • • • • • • • • • • • • • •
	Number Street City State ZIP Code	
City State Zif	City State ZIP Code	
City State Zif	City State ZIP Code	
City State Zif 110: Give Details About En the purpose of Part 10, the follow	City State ZIP Code nvironmental information ing definitions apply:	
City State Zif 140: Give Details About En the purpose of Part 10, the follow	City State ZIP Code nvironmental information ing definitions apply: eral, state, or local statute or regulation concerning pollution, cont	tamination, releases of
City State Zife State Zife City Give Details About En the purpose of Part 10, the followin vironmental law means any federazardous or toxic substances, was	City State ZIP Code nvironmental Information ing definitions apply: eral, state, or local statute or regulation concerning pollution, contestes, or material into the air, land, soil, surface water, groundwater	tamination, releases of er, or other medium,
Give Details About Enterprise of Part 10, the following invironmental law means any federate output for the purpose of the purpose of Part 10, the following invironmental law means any federate output for the purpose of the purpose of Part 10, the following purpose of Part 10, the purpose of Part 10, the following purp	City State ZIP Code nvironmental Information ing definitions apply: eral, state, or local statute or regulation concerning pollution, contestes, or material into the air, land, soil, surface water, groundwate ontrolling the cleanup of these substances, wastes, or material.	er, or other medium,
City State ZIF CO: Give Details About En the purpose of Part 10, the following invironmental law means any federal azardous or toxic substances, was cluding statutes or regulations of the means any location, facility, or	City State ZIP Code nvironmental Information ing definitions apply: eral, state, or local statute or regulation concerning pollution, contestes, or material into the air, land, soil, surface water, groundwater	er, or other medium,
Give Details About Enterprise of Part 10, the following invironmental law means any federate of the purpose of Part 10, the following invironmental law means any federate of the purpose	City State ZIP Code nvironmental Information ing definitions apply: eral, state, or local statute or regulation concerning pollution, contestes, or material into the air, land, soil, surface water, groundwate ontrolling the cleanup of these substances, wastes, or material. If property as defined under any environmental law, whether you not utilize it, including disposal sites.	er, or other medium, ow own, operate, or
Give Details About Enterprise of Part 10, the following invironmental law means any federate actions or toxic substances, was cluding statutes or regulations of the means any location, facility, or dilize it or used to own, operate, or actions material means anything	City State ZIP Code nvironmental Information ing definitions apply: eral, state, or local statute or regulation concerning pollution, contestes, or material into the air, land, soil, surface water, groundwate ontrolling the cleanup of these substances, wastes, or material.	er, or other medium, ow own, operate, or
Give Details About Enterprise of Part 10, the following invironmental law means any federate or toxic substances, was cluding statutes or regulations of the means any location, facility, or illize it or used to own, operate, or exardous material means anythin abstance, hazardous material, po	City State ZIP Code nvironmental Information ing definitions apply: eral, state, or local statute or regulation concerning pollution, contestes, or material into the air, land, soil, surface water, groundwate ontrolling the cleanup of these substances, wastes, or material. r property as defined under any environmental law, whether you not utilize it, including disposal sites. g an environmental law defines as a hazardous waste, hazardous llutant, contaminant, or similar term.	er, or other medium, ow own, operate, or
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Give Details About Enthe purpose of Part 10, the following invironmental law means any federazardous or toxic substances, was cluding statutes or regulations of the means any location, facility, or lilize it or used to own, operate, or exardous material means anything in the stance, hazardous material, point all notices, releases, and process.	reproperty as defined under any environmental law, whether you not utilize it, including disposal sites. g an environmental law defines as a hazardous waste, hazardous eledings that you know about, regardless of when they occurred.	er, or other medium, ow own, operate, or substance, toxic
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r 1 Stacie L McCray Pace First Name Middle Name	Last Name Case no	umber (if known)
	unit of any release of hazardous material?	
₫ No		
Yes. Fill in the details.		
	Governmental unit Environment	tal law, if you know it Date of notic
		al law, if you know it Date of notic
Name of site	Governmental unit	
Number Street	Number Street	
	Number Street	
	Co. L.	
	City State ZIP Code	
City State ZIP Co	de	
ve you been a party in any judicial (or administrative proceeding under any environment	tal law? Include settlements and orders
No	•	
Yes. Fill in the details.		
		Andrewski statistick i karaktering <u>k</u>
	Court or agency Nature of	of the case Status of the case
Case title		****
	Court Name	☐ Pending
		On appe
	Number Street	· ·
		☐ Conclude
Case number	City State ZIP Code	
A sole proprietor or self-employ	kruptcy, did you own a business or have any of the good in a trade, profession, or other activity, either full company (LLC) or limited liability partnership (LLP)	ll-time or part-time
☐ An officer, director, or managin	I executive of a corporation	
All owner of at least 5% of the \	oting or equity securities of a corporation	
No. None of the above applies. Go		
Yes. Check all that apply above and	fill in the details below for each business.	
	Describe the nature of the business	Employer Identification number
Business Name		Do not include Social Security number or ITIN.
Number Street		EIN:
Mannet anset	Name of accountant or bookkeeper	Dates husiness existed
		Dates business existed
		-
City State ZIP Code		From To
	Describe the nature of the business	
	bescribe the nature of the business	Employer Identification number
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or 1 Stacie L Mc	Cray Pace	Congruphs	
First Name	Middle Name Las	ot Name Case number	(if known)
		Describe the nature of the business	Employer Identification number
****		Describe the nature of the pusiness	Do not include Social Security number or ITIN.
Business Name		-	
			EIN:
Number Street		Name of accountant or bookkeeper	Dates business existed
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City	State ZIP Code		From To
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		naré issinén 1975 YUNU	
Name		MM / DD / YYYY	
3			
Number Street			
City	State ZIP Code		
123 Sign Below			
	ankruptcy case can	t of Financial Affairs and any attachments, and I decided that making a false statement, concealing property result in fines up to \$250,000, or imprisonment for use N/A	
Signature of Debtor 1	way		
/ /	/	Signature of Debtor 2	
Date 2/07/20		Date	
d you attach additio	nal pages to Your St	atement of Financial Affairs for Individuals Filing for	Bankruptov (Official Form 107)?
1 No			(willow) out losts
Yes			
			
id vou nav or agree t	n nau camacast		
No	o hay someone who	is not an attorney to help you fill out bankruptcy for	ms?
	n		
reservance of persor		- Attach t	the Bankruptcy Petition Preparer's Notice, ation, and Signature (Official Form 119).

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Fill in this in	formation to ide	entify your case:		
Debtor 1	Stacie L McC			
		Middle Name	Last Name	
Debtor 2	N/A			
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States 6	Bankruptcy Court fo	or the: Northern District of III	inois	
Case number (If known)			· · · · · · · · · · · · · · · · · · ·	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

 For any creditors that you listed in Part 1 of Sci information below. 	nedule D: Creditors Who Have Claims Secured by Property (Of	
Identify the creditor and the property that is colla	teral What do you intend to do with the property that secures a debt?	Did you claim the property
Creditor's name: Fifth Third Bank	Surrender the property.	□ No
Description of 2014 Hyundai Sonata	Retain the property and redeem it.	🖺 Yes
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]: avoid lier	<u>ı</u>
Creditor's name: N/A	☐ Surrender the property.	— □ No
Description of	Retain the property and redeem it.	Yes
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's name: N/A	☐ Surrender the property.	
	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	_ 100
	Retain the property and [explain]:	_
Creditor's name: N/A	☐ Surrender the property.	 □ No
	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	- 100
	Retain the property and [explain]:	_

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Debtor 1

Stacie L McCray Pace

	- mooray i	
First Name	Middle Name	Last Name

Part 2: List Your Unexpired Personal Property Le	ases
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For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

□ No
kspring, dresser/ mirror
☑ No
Yes
☐ Yes
☐ No
Yes
□ No
Yes
□ No
Yes
☐ No
Yes
n about any property of my estate that secures a debt and any